

L12000048075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

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J. SAULSBERRY
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NOV 1 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BEAUTIFUL IN PARADISE**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bryan Mundy

Name of Person

Billy salon gallery

Firm/Company

5100 Tamiami Trail N #204

Address

Naples, FL 34103

City/State and Zip Code

bryan@billysalon.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bryan Mundy

Name of Person

at (**239**) **641-0142**

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

2013 OCT 30 AM 9:26

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: BEAUTIFUL IN PARADISE

2. (a) Principal office address of limited liability company: 5100 TAMAMI TRAIL N #204
(Note: **MUST BE STREET ADDRESS**) NAPLES, FL 34103

(b) Mailing address of limited liability company: 5100 TAMAMI TRAIL N #204
(Note: **MAY BE POST OFFICE BOX**) NAPLES, FL 34103

04/09/2012
3. Date of filing/registration in Florida

L12000048075
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: MUNDY, BRYAN

Registered Office Address: 144 LIVERMORE LN
NAPLES, FL 34119

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: MUNDY, BRYAN

NEW Registered Office Address: 26244 PRINCE PIERRE WAY
(**MUST BE FLORIDA STREET ADDRESS**) BONITA SPRINGS, FL 34135

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were sanctioned by the unanimous vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Bryan Mundy

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to maintain the proper and complete performance of my duties, Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00