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| (Requestor's Name) | | |
|---|----------------|-------------|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE TALLAHASSEE, FLORID

TILTI

J. SAULSBERRY EXAMINER JUN 21 2012

COVER LETTER

| Division of Corporations | |
|--|---|
| SUBJECT: BILL'S BARBERSHOP Name of Limited I | |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Ch | ange and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter | ter to the following: |
| WILLIAM G'IBSON Name of Person | |
| Firm/Company | 2912 J SECH TALLA |
| 5156 GOSHAWK DR. | BIZ JUN 20 AM 9: 24 SECRETARY OF STATE ALLAHASSEE. FLORID |
| MILTON, FL 32570 City/State and Zip Code | 9: 2: ORIDA |
| ABG 1995 @ GMALL. COM E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, pleas | e call: |
| AUDRLY / BILL GIBSON at (G | 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 amou | int: |
| √\$25 Filing Fee | \$55 Filing Fee & Certified Conv |

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.

| BARBERSHOP & DIXIE NAILS |
|---|
| y: 4881 GLONER LANE |
| MILTON, FL 32570 |
| 4881 GLOVER LANE |
| MILTON, FL 32570 |
| L1200063701 4. Document number |
| the records of the Florida Dept. of State: |
| STATES CORPORATION AGENTS, INC |
| 13302 WINDING OAK COURT SUITE A TAMPA, FL 33612 |
| EW Registered Office address: |
| WILLIAM GIBSON |
| 5156 GOSHAWK DR. MILTON ,FL 32570 |
| e laws of the State of Florida, it is hereby Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization ny. agree to act in this capacit? I further lagree to proper and complete performance of my duties, position as registered again, as provided for in the registered office my has been notified in writing of this change. |
| |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00