## L14000014419

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SECRETARY OF SIANL DIVISION OF CORPORATIONS

1-12-15

TO: Registration Section
Division of Corporations
SUBJECT: STAR PET BEAUTY PARIOR LLC 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:
Curtis Hollings worth Name of Person
STAR PET BEAUTY PARIOR LLC Firm/Company
2201 SE INDIAN ST C-7 Address
STURRET F1. 34997 City/State and Zip Code
Pet Beauty Parlor @ GMAIL - COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Our tis Hollingsworth at (772) 221-9330  Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

INHS18 (2/14)

2661 Executive Center Circle

Enclosed is a check for the following amount:

Tallahassee, Florida 32301

□ \$25 Filing Fee

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

i.	Na	me of the limited liability company: STAR Pet Beauty	PARLOR LLC	
2.		2201 SE INDIAN ST C-7 (6) 22	OL SEINLIANST C-7	
		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		C. (1 :) 24000		
		STURRY, MORIDA 34997 STU	ART, Florida 34997	
		JANUARY 27, 2014 L10	1000014419	
3.		Date of filing/registration in Florida 4.	Document number	
5.	(a)	Legaline Copporate Scruices INC. Registered Agent and Registered Office shown on the records of the Florida Dept. of Str		
		20 th	uc.	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	_	
		DORAL, Florida 33/22		
		DUERT, TOKIBA SSTAA		
		, FL	JAN	
	(b)	Curtis Hollingsworth	2	r• =
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		<u>,</u>
		22.1. == 1.11. == 0.7	AH 7	
		2201 SE INDIAN ST C-7 NEW Registered Office Address:	P: 45	
			<b>0</b> , £	
		Sturrt, Florida 34997	_	
		, FL	<del></del>	
the age was the	cha ent w s/we arti	imited liability company is not organized under the laws of the State of Finge or changes are made, the Florida street address of the registered official be identical. Or, in the case of a Florida limited liability company, it are authorized by an affirmative vote of the members of the limited liability company of the organization or the operating agreement of the limited liability company.	ce and the business office of the registere is hereby confirmed that the change(s) ty company or as otherwise provided in	∍d
	7	ture of a member or authorized representative of a member	Printed or typed name of signee	
the to i	obl. mere ifie	by accept the appointment as registered agent and agree to act in this ca ons of all statutes relative to the proper and complete performance of migations of my position as registered agent as provided for in Chapter of Ely reflect a change in the registered office address, I hereby confirm that in writing of this change.	pacity. I further agree to comply with the duties, and I am familiar with and acce 15, F.S. Or, if this document is being file t the limited liability company has been	e pt d
•	1	Division of Cornerations P.O. Por 6327a Tollah	10000 FI 2721 <i>A</i>	