## L14000087733

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·				
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## **COVER LETTER**

TO:

Registration Section

División of Corporations	
SUBJECT: ECO-ORGANIC SALON	
Name of	f 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 m	natter to the following:
HISHAM KHOURSHID	
Name of Person	<del></del>
ECO-BEAUTY SALON	
Firm/Company	<del></del>
13710 CRYSTAL RIVER DR	
Address	<del></del>
ORLANDO, FL 32828	
City/State and Zip Code	
dallyk@yahoo.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ease call:
Dally Coimbra	407 381-8045
Name of Person	Area Code & Daytime Telephone Numbe
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 an	nount:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	



May 27, 2016

HISHAM KHOURSHID 13710 CRYSTAL RIVER DR ORLANDO, FL 32828 US

SUBJECT: ECO-ORGANIC SALON, LLC

Ref. Number: L14000087733

We have received your document for ECO-ORGANIC SALON, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 416A00011288

## ATEMENT 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.

1. Na	ime of the limited liability company: Eco-Organic S	Salon					
2. (a)		_ (b)	•				
(,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0,		Mailing address of (Note: MAY BE		-	
	448 S. Alafaya Trail, #13		13710 C	Crystal River Dr.			
	Orlando FI 32828	<del></del>	Orlando,	FI 32828			
	5/17/16						
3.	Date of filing/registration in Florida	4.	•	Document nur	nber		
5. (a)	Dally Coimbra						
J. (a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	<b>:</b>			
	•						
	Registered Office Address (MUST BE FLORIDA STREET A	<i>IDDRESS</i>		•			
	13710 Crystal River Dr.						
	Orlando,	32828		•	arryan B		
				-	<u> </u>	16	
(b)	Hisham Khourshid			_	1/2	AUL M	
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress:		HASS	JUN 23	der i
	•					2	E E I
	NEW Registered Office Address:			-	0 5 5	ဏ္	Property of the second
	13210 Crystal River D	ır.		-	RIDA	9	i I
	ORlando ,FL		2828				
the chiagent was/w the art  Signa  I here provis the obto mer	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the atture of a member or authorized representative of a member obvious of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I is din writing of this change.	vs of the the regis ability co of the lim limited l	State of Flo stered office impany, it is ited liability iability com	e and the busing the hereby confirms or a support of the hereby company or a support of the hereby confirms or the hereby confirms of the	ess office med that as otherw of mame of si	e of the classe progression of the classe pr	e registered hange(s) ovided in

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