

L16000 190 533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

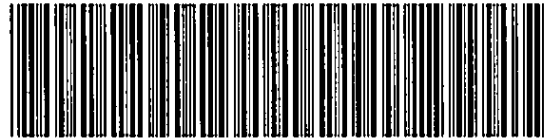
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900350126099

08/12/20--01003--007 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
20 AUG 12 AM 11:12

Ra Change

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DAVIS ISLAND SALON, 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:

Saima Abid

Name of Person

DAVIS ISLAND SALON, LLC

Firm/Company

215 E Davis Blvd, STE B

Address

Tampa, FL 33606

City/State and Zip Code

davisisland.threadingsalon@gmail.com

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

For further information concerning this matter, please call:

Saima Abid

at (813) 550-9177

Name of Person

Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
20 AUG 12 AM 11:12

# 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.

1. Name of the limited liability company: DAVIS ISLAND SALON, LLC

2. (a) Saima Abid (b) Saima Abid

Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

215 E Davis Island Blvd STE B

Tampa, FL 33606

Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

215 E Davis Island Blvd STE B

Tampa, FL 33606

10/14/2016

L16000190533

3. Date of filing/registration in Florida

4. Document number

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

Saima Javed

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3211 W Swann Ave APT 1001

Tampa, FL 33606

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

Saima Abid

**NEW Registered Office Address:**

215 E Davis Blvd Ste B

Tampa, FL 33606

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
20 AUG 12 AM 11:12

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 authorized by an affirmative 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

Saima Abid (owner)  
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 comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, 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