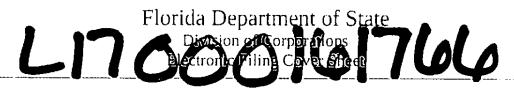
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE WELLINGTON SALON INVESTMENT LLC

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K. Brumble

4/8/2024 11:43:06 PDT 7 To 18506176383 Page: 2/2 Fax: 8134365206

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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	ame of the limited liability company: WELLINGTON S.	ALON INVESTI	ACM FFC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	08/01/17		00161766
3.	Date of filing/registration in Florida		Document number
·	Vian Enteroxicos Inc		
5. (a)	Registered Agent and Registered Office shown on the records of 5645 Coral Ridge Drive		
	Registered Office Address	ADDRESS)	
	409		
	Coral Springs	33076	2024
(b)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N	d Office address	PH ::
	NEW Registered Office Address: STE 300		25
	St. Petersburg, FI	33702	
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of the operating agreement of the	f the registered lability comparts of the limited chaited liabil	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Signa	ture of a member or authorized representative of a member	Robin Jor	Printed or typed name of signee
I here provisi the obl to mere	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. If in writing of this change.	performance ed for in Chap hereby confir	his canacity. I further govee to comply with the