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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

Enter the email address for this business entity to be used for future ഇ annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE MIAMI SALON INVESTMENT LLC

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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.

2. (a)		(h)		
:. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of lin	nited liability company: OST OFFICE BOX
	04/08/18	L18	8000089036	
6.	Date of filing/registration in Florida	4.	Document numb	er
5. (a)				
	Registered Agent and Registered Office shown on the records	of the Florida Do	ept. of State:	
	5645 Coral Ridge Drive			
	Registered Office Address (MUST BE FLORIDA STREE			
	409			
	Coral Springs	_{-L} 33076		
		<u> </u>		
(b)				202
	Enter name of NEW Registered Agent and/or NEW Register	ed Office addre	<u>ss</u> :	2024 APR
	7901 4th St N			 `.'''
	NEW Registered Office Address:			0 :
	STE 300			=======================================
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	St. Petersburg	33702		32
C.L.	limited liability company is not organized under the l			and forward that after
he ch igent vas/w	ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited tere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the register liability comp s of the limite	red office and the business pany, it is hereby confirmed I liability company or as o	s office of the registered that the change(s)
12.0	bearing towns as	Robin J	ones	
Sign	nture of a member or authorized representative of a member		Printed or typed nar	-
I here provis he ob o men totifie	by accept the appointment as registered agent and a sions of all statutes relative to the proper and comple ligations of my position as registered agent as provide the reflect a change in the registered office address, and in writing of this change.	gree to act in te performand ded for in Cha I hereby conf	this capacity. I further as ce of my duties, and I am) upter 605, F.S. Or, if this irm that the limited liabili	gree to comply with th amiliar with and acce document is being file ty company has been
	David Roberts - Assistant	Secretary		