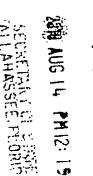
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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
,		
(Document Number)		
(2.2.2		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

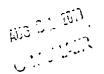


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08/14/19--01013--026 **25.00



Office Use Only



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CJ Skin Care Consu	il Hant LLC isability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and	I fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Roberto C Pinzas Name of Person	
Next Logistic Gray Firm/Company	
8720 MICALAGO WAY Address	
Parleland FL 33076 City/State and Zip Code	
E-mail address: (to be used for future annual report noti	fication)
For further information concerning this matter, please call:	
Probecto Pinzas an gri	955 5647
Name of Person	Area Code & Daytime Telephone Number
Registration Section Ro Division of Corporations D Clifton Building P.	AILING ADDRESS: Egistration Section Evision of Corporations O. Box 6327 Ellahassee, Florida 32314
Enclosed is a check for the following amount:	
☑ \$25 Filing Fee ☐ \$	55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOILIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability comparsubmits the following statement in order to change its registered office or registered agent, or both, in the State & Florida.

1. Name of the limited liability company: UT Skin Care Consultant LLC.
2. (a) 85 to H(10/650 Way (b) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
7/31/19 L 18000 108701 3. Date of filing/registration in Florida 4. Document number 5. (a) Legaline Coaparate Service Ine
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 5237 Sunner In Commons Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Tent Myers .FL 33507
(b) Registered Office Address: Description Property Propert
Parhland 11, 33076
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 register 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 of member or authorized representative of a member 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 stocutes 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 fill to marely reflect a chapter in the registered office address. Thereby confirm that the limited liability company has been notified in writing of his change.
Division of Corporations P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

INHS1872/14Y