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(R	equestor's Name)	
(A	ddress)	
	ddress)	
(C	ity/State/Zip/Phone #))
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		





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SEP 1 9 2019 I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: HUNK Beauty Supplies 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:				
Louis Denofrio Name of Person				
Hunk Beauty Supplies Firm/Company				
200 Hypoluxo Rd 104				
Hypoluxo Fl 33462 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Louis DeNotro at (561) 779 3001 Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother 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 amount:				
\$25 Filing Fee				

INHS18 (2/14)



September 10, 2019

LOUIS DENOFRIO 200 HYPOLUXO RD STE. 104 HYPOLUXO, FL 33462

SUBJECT: HUNK BEAUTY SUPPLIES LLC

Ref. Number: L19000184076

We have received your document for HUNK BEAUTY SUPPLIES 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):

You failed to date, sign and type print your name in the space provided on the form.

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) 245-6050.

Letter Number: 419A00018628

Irene Albritton Regulatory Specialist II

www.sunbiz.org

DO TO THE DO DOY COOR IN HILL STOLE 1 COO.



August 22, 2019

LOUIS DENOFRIO 200 HUPOLUXO RD STE. 104 HYPOLUXO, FL 33462

SUBJECT: HUNK BEAUTY SUPPLIES LLC

Ref. Number: L19000184076

We have received your document for HUNK BEAUTY SUPPLIES 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):

Presently it is unclear as to what changes you wish to make as the registered agent is the same as what you have listed in the space provided forthe new registered agent information.

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) 245-6050.

Letter Number: 319A00017373

Irene Albritton Regulatory Specialist II

2019 SEP - 9 PH 2: 2

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

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

Florido	· · · · · · · · · · · · · · · · · · ·	
I. Na	me of the limited liability company: HONK Beauly	Supplies
2. (a)	LOUIS DeNOTATO (b)	
. ,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
(200 Hypoluxo Rd Steloy	
1	Hypoluxo Fl 33462	
		0000000
2	7/17/19	9000184074
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat	_ ,p.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
		2613
	11 4-1 12	
	14/2010/0 FL 334/28	
(b)	Louis R DeNotrio	P.:
(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	<i>:</i>
		<u>-</u>
	200 Hypoluxo TZd Str. 1 NEW Registered Office Address:	-64
	Registered Office Address.	
		_
	Hypoluxo FL 3346)
1£ 41 1:		
the chai	mited liability company is not organized under the laws of the State of Flage or changes are made, the Florida street address of the registered office	e and the business office of the registered
agent w	ill be identical. Or, in the case of a Florida limited liability company, it re authorized by an affirmative vote of the members of the limited liabili	is hereby confirmed that the change(s) ty company or as otherwise provided in
the artic	cles of organization or the operating agreement of the limited liability cou	mpany.
Cianus	Your Deholo Los	Printed or typed name of signee
Llwrob	y accept the appointment as registered agent and agree to act in this car	racity. I further goree to comply with the
provision the obli	ons of all statutes relative to the proper and complete performance of my gations of my position as registered agent as provided for in Chapter 60 by reflect a change in the registered office address. I hereby confirm that	duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed
попунса	pi wruing pj trus change.	the limited liability company has been
	our fley du	
Signa(ylr	e of Registered Agent	

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