

L20000058695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

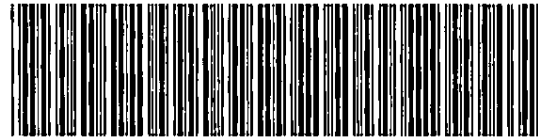
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2022 APR 26 PM 12:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 25, 2022

CASSIE STEELE
1761 PEPPER STONE CT
ST.AUGUSTINE, FL 32092 US

SUBJECT: CSALON LLC
Ref. Number: L20000058695

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a ALIEN ORGANIZATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 422A00007061

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C 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:

Cassie Steele
Name of Person

C Salon LLC
Firm/Company

~~1761 Pepper Stone Ct~~ 1761 Pepper Stone Ct
Address

St. Aug FL 32092
City/State and Zip Code

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

For further information concerning this matter, please call:

Cassie Steele at (904) 669-4440
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

**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: C Salon LLC
2. (a) 1520 Longleaf Ave.
Saint John FL 32055
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
- (b) 1761 Pepper Stone Ct St Aug. FL 32092
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 2-21-2020
Date of filing/registration in Florida
4. L20000058695
Document number

5. (a) United States Corporation Agents Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
5575 S. Semoran Blvd
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 30
Orlando, FL 32822

- (b) Cassie Steele
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1761 Pepper Stone Ct
NEW Registered Office Address:

St. Aug, FL 32092

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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

Cassie Steele
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