## 120000105409

(Re	equestor's Name)	
(Ad	ldress)	
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/Cit	ty/State/Zip/Phone #	<u> </u>
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	)
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(Do	ocument Number)	
Certified Copies	Certificates o	of Status
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Special Instructions to	Filing Officer:	





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SUCH DANY OF STATE OF CORPORATION

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## COVER LETTER

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TO: Registration Section Division of Corporations		THE COURT
SUBJECT: TOUCHED COMULIC	S By Cay La ability Company	OF STATE
Dear Sir or Madam:		<i>™ ™</i>
The enclosed Registered Agent/Registered Office Change and f	fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the fe	ollowing: NAP T fg1	red
Vay a Dlad Name of Person	- referent	aperun
TOUCHOOLOGUS BY Ka	yla charis	gert,
6323 Relling Twee St	_ Ulve _ Zres	saredo
City/State and Zip Code	Ellin	Jagan,
E-mail address: (to be used for future annual report notific	t cation)	register,
For further information concerning this matter, please call:	'i/t	(insect
Name of Person at (850)	) 747-1648 Area Code & Daytime Telephone Number	er CO
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	445 445 04 850-797- 1648
Enclosed is a check for the following amount:		

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

July 10, 2020

TOUCHED COSMETICS BY KAY'LA L.L.C. 6323 ROLLING TREE ST JACKSONVILLE, FL 32222

SUBJECT: TOUCHED COSMETICS BY KAY'LA L.L.C.

Ref. Number: L20000105409

Our records indicate the registered agent for the above named limited liability company resigned on May 13, 2020 and that the limited liability company currently does not have a registered agent designated.

Chapter 605, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6823.

Tammi Cline Regulatory Specialist III Division of Corporations

www.sunbiz.org

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Letter Number: 320A00013426

## 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.

l. Na	ame of the limited liability company: TOXA Ed (ONCHES EY V	aylla
2. (a) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (b) C373 Padding -  Mailing address of limited liability company:  (Note: MAY BE POST O	iability company:
	Julisnyelle FL 32222 Jacksonver	1-2,F432
3.	Date of filing/registration in Florida  4. Document number	9
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	SECRET CHASEDY C
(b)	Layladeal	FEORTORA
	Enter name of NEW Registered Agent and/or NEW Registered Office address:  (0323 Pelling The St	1.5 1.0%.
	NEW Registered Office Address:	
	Jacksonville FL 32222	
change agent w was/we the arti	limited liability company is not organized under the laws of the State of Florida, it is hereby configer or changes are made, the Florida street address of the registered office and the business office of will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that ere authorized by an affirmative vote of the members of the limited liability company or as otherwices of organization or the operating agreement of the limited liability company.  When the company is not organized under the laws of the State of Florida, it is hereby confirmed that the company is hereby confirmed that the company or as otherwices of organization or the operating agreement of the limited liability company.  Printed or typed name of some of the company of the	f the registered t the change(s) wise provided in
provisi the obli to mere notifiec	by accept the appointment as registered agent and agree to act in this capacity. I further agree to ions of all statutes relative to the proper and complete performance of my duties, and I am familialigations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documely reflect a change in the registered office address, I hereby confirm that the limited liability conditions of this change.  ANNO DEAL COMMENTAGES	o comply with the ar with and accept nent is being filed npany has been

Signature of Registered Agent