120000 336 157

(Requestor's Name)								
(Address)								
, ,								
(Address)								
(City/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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ALD ATASSELET

2022 JUL 15 AM II: 5



COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	ECT: A-BEAUTY GOODS LLO					
		Name of Limited I	Liability Company		-	
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered	Office Change and	d fee(s) are submitted for fil	ling.		
Please	return all correspondence concernir	ng this matter to the	following:			
Melis	sa Jones					
	Name of Person	-				
ZenBu	siness Inc.					
	Firm/Company				~	
336 E.	College Ave. Suite 301			<u>, </u>	2022 JUL 15 AMII:5	**
	Address		_ 	77 25 77	<u></u>	
Tailaha	assee, FL 32301			EVERNASSEUTI	51 ≥	5 (
	City/State and Zip Co	de			=	C
ra@ze	nbusiness.com			,	57	
Ē	-mail address: (to be used for future	annual report noti	fication)			
For fu	ther information concerning this ma	ntter, please call:				
Meli	ssa Jones	844 at (493-6249)			
	Name of Person		Area Code & Daytime T	elephone Numb	- 21	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314		Street Address: Registration Section Division of Corporati The Centre of Tallaha 2415 N. Monroe Street Tallahassee. FL 3230	et. Suite 810		
	Enclosed is a check for the follow	ving amount:				
	□ \$25 Filing Fee	<u> </u>	55 Filing Fee & Certified C	Сору		

INHS18 (2/14)

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. N	ame of the limited liability company: A-BEAUT	ΥG	Oí	ODS I	LC _			
	11273 SOUTHWEST 231ST LANE	=	4.	11273	SOUTHWI	EST 231ST LANE		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	MIAMI, FL 33170			MIAM	I, FL 33	3170		
		_						
	08/05/2020	_		_2000	0236157	7		
3.	Date of filing/registration in Florida	4.			Document m	umber		
5. (a)	Registered Agents Inc.							
(,	Registered Agent and Registered Office shown on the records of	he Flor	rida I	Dept. of State	- £ :			
	7901 4th St N							
	Registered Office Address (MUST BE FLORIDA STREET.	(DDRI	(22.		-			
	STE 300					2022		
	St. Petersburg , FL	33702	<u>,</u>		-	FILE MI		
(ъ)	ZenBusiness Inc				_	<i>y</i> ,		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				_	AH II: 5		
	336 E. College Ave.				_	:57		
	NEW Registered Office Address:				-			
	Suite 301				_			
	Tallabassee , FL	32301	t 		-			
chang agent was/w the art	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the Amanda Brooks	regist bility f the l limite	erec con limit d lia	l office and apany, it is led liability	d the business is hereby conf y company or ipany.	s office of the registered firmed that the change(s)		
Sign	ature of a member or authorized representative of a member	-				ed name of signee		
provis the ob to men notifie	eby accept the appointment as registered agent and agrions of all statutes relative to the proper and complete digations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change. The contract of Registered Agent	กอรโกร	ma	nce of mis i	duties and L	am familiar with and accent		