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(R	equestor's Name)	·····
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COVER LETTER

	sistration Section ision of Corporations	
SUBJECT:	Name of I	Coloria Beauty Lange LLC
		Smiled Elability Company
Dear Sir or I	Madam:	
The enclosed	d Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return	all correspondence concerning this matt	er to the following:
		Low Firm YA
	, ,	Brickell Bay Dr. \$ 2700 Eg
	Miami Fi City/State and Zip Code	
E-mail	France & address: (to be used for future annual rep	Efranco (Lie firmpa, com port notification)
For further in	nformation concerning this matter, please	call:
	Fernando Fanco at (786, 2915301 Area Code & Daytime Telephone Number
Regi Divi P.O.	ling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Encl	losed is a check for the following amou	nt:
■ \$2	25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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. Na	ame of the limited liability company: 6 lorical	- Bcac	ity Lunge	LLC			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
3.	Date of filing/registration in Florida	4.	(Document i		1297	978	
5. (a)	Francelara			Title C			
(b)	Registered Agent and Registered Office shown on the records of the 268 Alnambra Cin Registered Office Address (MUST BE FLORIDA STREET AD 5 = cond Floor Coral Gables FL	3313°	<u></u>	TĂLLAHASSEE, FLORIDA	2024 OCT -3 NM 8: 24	FILED	
	NEW Registered Office Address:	tway		ia A		2007	
	Sunny Fster Beach .FL			,	1 2	<i>70</i> 3	
change agent v was/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of teles of organization or the operating agreement of the line.	egistered off ility compar the limited l mited liabili	fice and the busines	ss office of th firmed that the or as otherwis	e registe te change	red e(s)	
Signat	ture of a member or authorized representative of a member		Printed or typ	ed name of sign	ee		
provisi the obli to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided felv reflect a change in the registered office address. I her in writing of this change.	rtormance e	of my duties, and L	am familiar v	with and	accent	