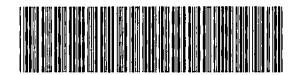
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: Santie Beauty, LLC Name of Lir	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ige and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Estrella Mendoza	
Name of Person	
Santic Beauty, LLC	
Firm/Company	- AAT-186
3080 NW 29th St	
Address	
Miami, FL 33142	
City/State and Zip Code	
star252017@gmail.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	cali:
Estrella Mendoza 73	86 858-5760
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
Enclosed is a check for the following amoun	Tallahassee, FL 32303 t: □ \$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.

. Na	ame of the limited liability company: Santie Beauty, L.	I.C	
(a)	3080 NW 29th St, Miami, FL 33142	(b) 3080) NW 29th St, Miami, FL 33142
. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	03/23/2021		0136850
	Date of filing/registration in Florida	4.	Document number
. (a)	INC Authority RA		
(12)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	
	Trevor Rowley		2021 TÃI
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	390 North Orange Ave, Ste 2300-N		APR 19
	Orlando F	L ³²⁸⁰¹	9 P
71.3	Santie Beauty, LLC		ETILLE D 2021 APR 19 PM 12: 40 TAILLANKSSEELFLORID
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	
	Estrella Mendoza		
	NEW Registered Office Address:		
	3080 NW 29th St		
	Miami . F	L ³³¹⁴²	
hange gent v /as/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered offi iability compan of the limited li	ice and the business office of the registered y, it is hereby confirmed that the change(s) lability company or as otherwise provided in
Signa	ature of a member or authorized representative of a member	+	Printed or typed name of signee
rovis he obs o mer otifie	thy accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in thi e performance o ed for in Chapte hereby confirm	s capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been
Signati	ure of Registered Agent		