

(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:				
Limits				





12/28/23--01040--014 **25.00



COVER LETTER

	istration Section sion of Corporations				
SUBJECT:	HAIR BY LE, LLC				
	Name of Limited Liability Company				
Dear Sir or 3	Madam:				
The enclose	d Registered Agent/Registered Off	ice Change and f	fee(s) are submitted for filing.		
Please return	n all correspondence concerning th	is matter to the fo	following:		
THU NGUY	ET LE				
	Name of Person				
HAIR BY L	F.				
	Firm/Company	-			
2444 Land (O' Lakes, BLVD.				
	Address				
Land O' Lak	xes, Florida 34639		-		
	City/State and Zip Code				
brianschoon	makerl@gmail.com				
E-ma	il address: (to be used for future an	nual report notifi	ication)		
For further	information concerning this matte	r, please call:			
Thu Nguyet	Le	860 at (573-2226		
	Name of Person		Area Code & Daytime Telephone Number		
Re Di P.0	egistration Section vision of Corporations O. Box 6327 Illahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
En	nclosed is a check for the following	ig amount:			
	\$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.

a) _	2444 Land O' Lakes, BLVD.	(b)	455 Lagerfeld Drive
<u>"</u> "	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Land O' Lakes, Florida, 34639		and O' Lakes, Florida, 34637
	January 18, 2022	1.2	2000034912
	Date of filing/registration in Florida	4.	Document number
(a)	INC AUTHORITY RA		
(a)	Registered Agent and Registered Office shown on the records of TREVOR ROWLEY		ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)	7.07
	390 North Orlando Avenue., STE 2300		
	Orlando	FL	2
(b)	Thu Nguyet Le - OWNER of HAIR BY LE Salon for LI		
	Enter name of NEW Registered Agent and/or NEW Register	<u>red Office addre</u>	9
	NEW Registered Office Address:		
	2444 Land O' Lakes, BLVD		
	Land O' Lakes	FL	
ange ent v	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited cre authorized by an affirmative vote of the member ides of organization or the operating agreement of the street o	ne registered liability comes of the limited the limited liab	pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company. NGUYET LE
	ature of a member or authorized representative of a member		Printed or typed name of signee

Signature of Registered Agent