Florida Department of State Division of Corporations Electron of Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE PRETTY IN MY SKIN LLC

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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.

	me of the limited liability company:			271 SW	30TH ROAD	
. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	(b)		Mailing address of lim	nited liability company: OST OFFICE BOX
	MIAMI, FL 33129	_		MIAMI,	FL 33129	
	05/01/2024		ĵ	.23000168	8963	
. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.			Document number	er
. (4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 476 RIVERSIDE AVE.					
	Registered Office Address (MUST BE FLORIDA STREET A	DDR	ESS)		_	
	JACKSONVILLE , FL	3220	2			202
(b) .	Corporate Creations Network Inc.				_	2024 156 Y
	Enter name of NEW Registered Agent and/or NEW Registered (Office	ndd	ress:		<u> </u>
	801 US Highway 1					- 0
	NEW Registered Office Address:					6: 26
	North Palm Beach , FL	3340	3		_	
hange gent v /as/we	imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liab.	egist oility the	terec cor limi	l office at npany, it ted liabili	nd the business offi is hereby confirmed ity company or as o	ice of the registered d that the change(s)
_	acueur ruraner		stre	lla Tavare	z. Attorney-in-Fact	
Signal	ture of a member or authorized representative of a member	_			Printed or typed nan	ne of signee
rovisi he obl v mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I ha I in writing of this change.	e to erfor for i	nct i rma, n Co r cor	n this cap nce of my hapter 60 nfirm thai	pacity. I further ag duties, and I am fo S. F.S. Or, if this a the limited liabilit	ree to comply with the imiliar with and accep locument is being filed y company has been

Catralla Tavarez Estrella Tavarez, Special Secretary Signature of Registered Agony