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COVER LETTER

ŢO: Reg Divi	istration Section ision of Corporations		
SUBJECT:	ENVIOUS SKIN & LASHES, LL	C	
SUBJECT.		ame of Limited L	iability Company
Dear Sir or I	Madam:		
The enclosed	d Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.
Please return	n all correspondence concerning	this matter to the	following:
Adam Saulte	rs		
	Name of Person		
ZenBusiness	Inc.		
	Firm/Company	<u> </u>	_
336 E. Colleg	ge Ave. Suite 301		
	Address		
Tallahassee,	FL 32301		••
	City/State and Zip Code		
ra@zenbusin	ess.com		•
E-mail	address: (to be used for future a	nnual report notif	ication)
For further i	nformation concerning this matte	er, please call:	
Adam Saulte	rs	844 at (493-6249
	Name of Person		Area Code & Daytime Telephone Number
Reg Div P.O	iling Address: pistration Section ision of Corporations Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	losed is a check for the following	ng amount:	
■ \$	25 Filing Fee	□ s	55 Filing Fee & Certified Copy
INHS18 (2/1-	4)		

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.

I. Na	ame of the limited liability company: ENVIOUS SKIN	& LAS	HE	S, LLC		
2. (a)	8005 NI WINIDRDEAK TED		(b) 8905 N WINDBREAK TER			
(-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	(-)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	DUNNELLON, FL 34433 UN	_		DUNNEL	LON, FL 34433 UN	
	06/05/2024		1.	.24000256	065	
3.	Date of filing/registration in Florida	4.			Document number	
5. (a)	BARNES, TERRA R					
(,	Registered Agent and Registered Office shown on the records of 8905 N WINDBREAK TER	the Flori	da I	Dept. of Stat	ee:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-		
	DUNNELLON, FL	34433			Brians -5	
(b)	ZenBusiness Inc.				٠	
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			- - - - - -		
	336 E. College Ave. Suite 301			NH 10: 12		
	NEW Registered Office Address:				_ :	
	Taliahassee, FL	32301			_	
change agent v was/w	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe bility of f the li	red con mit	office an pany, it i ed liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
	/s/ Terra Barnes			Barnes		
I here provisi the obli to mer notifie	ture of a member or authorized representative of a member by accept the appointment as registered agent and agri ons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in striting of this ahange. The of Registered Agent	ee to a perfori I for in iereby	ct ii nan Ch con	n this cap ace of my apter 605 firm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	