

L24 000408245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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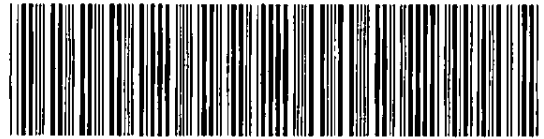
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KN NAIL ARTIST  
Name of Corporation

**DOCUMENT NUMBER:** L24000408245

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KATISLEIDIS VASCONCELOS MONTES DE OCA

Name of Contact Person

Firm/Company

9440 FONTAINEBLEAU BLVD APT 110

Address

MIAMI, FLORIDA, 33172

City/State and Zip Code

katisleidivasconcelo@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATISLEIDIS VASCONCELOS MONTES DE OCA

at ( 786 ) 9185843

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

2. The principal office address: 9440 FONTAINEBLEAU BLVD, APT 110, MIAMI FLORIDA 33172

4. Date of incorporation/qualification: 09/20/2024 Document number: 1.24000408245

Business Filings Incorporated

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1200 South Pine Island Road, Plantation, Florida 33324

KATISLEIDI VASCONCELOS MONTES DE OCA  
9440 FONTAINEBLEAU BLVD, APT 110 , MIAMI FLORIDA 33172  
P.O. Box NOT acceptable

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

If signing on behalf of an entity:

CR2E045 (04/13)