

## Florida Department of State

Division of Corporations Public Access System

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## REGISTERED AGENT CHANGE

REGAL NAILS, L.L.C.

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PAGE 08/08

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

	BOIRFORLIMITE	BEIABILITI COMPANI		
llability company sui agent, or both, in the	bmits the following statemen State of Florida.	or 608.508, Florida Statutes, the it in order to change its registered	undersigned limited l office or registered	
1. The name of the li	imited liability company is:	Regal Nails, L.L.C.		
2. The mailing addre	ss of the limited liability cor	npany is: 11488 S. Choctaw Dri	ive.	
Baton Rouge, Lou				
		140000001040	*	
7/25/2002 M02000001940  3. Date of filing/registration in Florida 4. Document number			·	
3. Daw of Hingregi	stration in Figure	4. Document number		
5. The name of the re Florida Departmen	gistered agent and the regist	ered office address as shown on the	records of the	
Liorios Debaranen	Corporation Service	Company		
		Name		
	1201 Hays St	Address	AE O6	
•	Tallahassee, Fiorida		<u> </u>	
	City, S	State and Zip	96 OCT 16 SECRETAR ALLAHASS	
6. The name and add	ress of the new registered ag	ent and/or office:	1771	
•	Business Filings Incorporated		AM 9: 11	
	1203 Governors Squ	1203 Governors Square Blvd, Suite 101		
	Florida street address	(P.O. Box NOT acceptable)	<b>&gt;</b>	
	Tallahassee	FL 32301-2960		
	City, St	ate and Zip		
confirmed that after and the business office liability company, it the members of the lithe operating agreem	the change or changes are ma ce of the registered agent wil is hereby confirmed that the imited liability company or a cent of the limited liability co		e registered office Porida limited no affirmative vote of	
- 1	anthonized representative of a member	)		
Quy Ton, Member (Printed or typed name of s		<del></del>		
I hereby accept the comply with the provand I am familiar with Chapter 508, F.S. Oaddress, I hereby con	appointment as registered ag islons of all statutes relative th and accept the obligations r, if this document is being fi afirm that the limited liability	rent and agree to act in this capacity to the proper and complete perform of my position as registered agent iled to merely reflect a change in the company has been notified in write  peraled, Mark Schiff, Auf	y. I further agree to nance of my duties, as provided for in e registered office ing of this change.	
		). Box 6327, Tallahassee, FL 323	14	

FILING FEE: \$25.00

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