## 11500000121

(Re	equestor's Name)			
(Ad	dress)	<del></del>		
(Ad	dress)			
(Cit	ty/State/Zip/Phon	e #)		
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(Business Entity Name)				
(Document Number)				
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## COVER LETTER

Registration Section
Division of Corporations

TO:

Lady Jane's Clearwater FL, LL SUBJECT:	С
	f Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Chad Johnson	
Name of Person	
Lady Jane's Haircuts for Men	
Firm/Company	nuae
3921 Rochester Rd	
Address	
Troy, MI 48083	
City/State and Zip Code	
amajeske@ljhaircuts.com	
E-mail address: (to be used for future annua	report notification)
For further information concerning this matter, pl	ease call:
Ann Majeske	248-689-0997
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following an	mount:
☑ \$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)	Principal office address of limited liability company:	(b	)	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	2084 Gulf to Bay Blvd		3921 Ro	chester Rd
	Clearwater, FL 33765		Troy, MI	48083
	2/12/15		MI	5000001277
	Date of filing/registration in Florida	— 4.		Document number
. (a)				_
, (,	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State	- e:
	Chad Johnson			_
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	2)	
	2094 Gulf to Bay Blvd	_		_
	Clearwater	33765		
				7 SE SE
(b)				LATE CATE
` `	Enter name of NEW Registered Agent and/or NEW Register		dress:	RETARY THASSE
				-6 PI ARY C ASSEE
	NEW Registered Office Address:		<del></del>	SECRETARY OF STATALLAHASSEE, FLOR
	2084 Gulf to Bay Blvd			12: 51 STATE FLORID
			<del></del> -	DE P
	Clearwater	<sub>FI</sub> 33765		
		L		-
the l	limited liability company is not organized under the lange or change are made, the Florida street address	laws of the	State of Flo stered office	orida, it is hereby confirmed that after each and the business office of the registered
ie ch gent	lange or changes are made, the Florida street address will be identical. Or In the case of a Florida limited	of the regi	stered officompany, it is	e and the business office of the registered is hereby confirmed that the change(s)
ne ch gent	lange or changes are made, the Florida street address will be identical. Or In the case of a Florida limited	of the regi	stered officompany, it is	e and the business office of the registered is hereby confirmed that the change(s)
ie ch gent	lange or changes are made, the Florida street address	of the regi liability c s of the lin he limited	stered officompany, it is	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
ne ch gent /as/w ne art	lange or changes are made, the Florida street address will be identical. Or In the case of a Florida limited	of the regi liability c s of the lin he limited	stered office ompany, it in ted liabilith liability con	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
gent vas/was/was art	range or changes are made, the Florida street address will be identical. Or In the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the ature of a member or authorized representative of a member selve accept the exportment as registered agent and a	of the regi liability constant of the limited Ch	stered office ompany, it in ited liability liability con ad Johnso	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in mpany.  Printed or typed name of signee  Printed or typed name of signee
signal	range or changes are made, the Florida street address will be identical. Or In the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the ature of a member or authorized representative of a member	of the regi liability constant of the limited Ch	stered office ompany, it in ited liability liability con ad Johnso	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in mpany.  Printed or typed name of signee  Printed or typed name of signee