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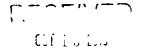
(Requestor's Name)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



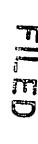
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SECRETARY OF STATE TALLAHASSEE, FI





CSC - WILMINGTON 251. Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: October 4, 2018

Order#: 419744-011

Re: REGAL NAILS, SALON & SPA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Anthony Arthur c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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	me of the limited liability company: REGAL NAILS, S	SALON 8	& SPA, LLC			
2.	(a)	5150 FLORIDA BLVD.		5150 FLORIDA BLVD.			
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		BATON ROUGE, LA 70806	-	BATON ROUGE, LA 70806			
		03/03/2006		M06000001298			
3.		Date of filing/registration in Florida	4.	Document number			
5.	(a)	NRAI SERVICES, INC					
	. ,	Registered Agent and Registered Office shown on the records of the Florida Dept, of State;					
		1200 SOUTH PINE ISLAND ROAD					
		Registered Office Address (MUST BE FLORIDA STREET AL	2				
		Plantation	22224				
		Plantation , FL_	33324	'			
	(b)	Corporation Service Company					
		Enter name of NEW Registered Agent and/or NEW Registered C	Office add	dress:			
		1201 Hays Street					
		NEW Registered Office Address:					
		Tallahassee , FL	32301				
the ag wa	chai ent w is/we	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liability reauthorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability and the second street of the second	he regist pility cor the limi	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in			
/s/ Jill Cilmi			Jill C	Jill Cilmi, Authorized Person			
	_	ure of a member or authorized representative of a member		Printed or typed name of signee			
pr the to	ovisio e obli mere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I he is in writing of this change.	e to act i erforma for in C ereby co	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Thapter 605. F.S. Or, if this document is being filed onfirm that the limited liability company has been			
Si	gnatur	e of Registered Agent Corporation Service Company	BY: Gr	race E. Kirby, Assistant Vice President			

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

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1.	Na	me of the limited liability company: REGAL NAILS, S	SALON 8	SPA, LLC			
2.	(a)	5150 FLORIDA BLVD.	(b)	5150 FLOF	RIDA BLVD.		
	. , .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Maili	ing address of limited liability company: ote: MAY BE POST OFFICE BOX)		
		BATON ROUGE, LA 70806	<u>-</u>	BATON ROL	JGE, LA 70806		
		03/03/2006		M06000001298			
3.		Date of filing/registration in Florida	4.	Do	cument number		
5.	(a)	NRAI SERVICES, INC					
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
		1200 SOUTH PINE ISLAND ROAD					
		Registered Office Address (MUST BE FLORIDA STREET AI	DDRESS)		MINOCT 15 M 8: 19 SHALLAHASSEE, FL		
		Plantation . FL_	33324		5 1		
	(b)	Corporation Service Company	Signal Control				
-	(0)	Enter name of NEW Registered Agent and/or NEW Registered C	ffice address:		-F		
		1201 Hays Street			, , ,		
		NEW Registered Office Address:					
		Tallahassee FL_	32301				
the ag wa	e char ent w is/we	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liable re authorized by an affirmative vote of the members of these of organization or the operating agreement of the limited liable.	he regist pility cor the limit	ered office and apany, it is he ded liability co	d the business office of the registered reby confirmed that the change(s) impany or as otherwise provided in		
		/s/ Jill Cilmi	Jill C	lmi, Authorize	d Person		
	Signat	ure of a member or authorized representative of a member		Pri	nted or typed name of signee		
pro the to no	ovisio e obli mere tifiea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I he is in writing of this change.	erforma for in Ci erehy coi	nce of my duti- iapter 605, F., ifirm that the	es, and I am familiar with and accept S. Or, if this document is being filed limited liability company has been		
Si	gnatur	e of Registered Agent Corporation Service Company	BY: Gr	ace E. Kirby,	Assistant Vice President		