Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000278541 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : INCORP SERVICES INC

Account Number: I20120000007

Phone : (702)866-2500

Fax Number

: (702)866-2689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_documents@incorp.com

## REGISTERED AGENT CHANGE BOUND BY BEAUTY INC.

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Date: 8/13/2020 11:30:26 AM

## **COVER LETTER**

(H20000278541 3)

TO:

Amendment Section Division of Corporations

SUBJECT: Bound By Beauty Inc. Name of Corporation

To: 8506176383

DOCUMENT NUMBER: N16000008669

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:

Patricia Sillyman

Name of Contact Person

InCorp Services, Inc.

Firm/Company

3773 Howard Hughes Pkwy. Suite 500S

Address

Las Vegas, NV 89169-6014

City/State and Zip Code

documents@incorp.com

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

For further information concerning this matter, please call:

Patricia Sillyman on behalf of InCorp Services, Inc. at 800-246-2677

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

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS (H20000278541 3)

statement of	he provisions of sections 607 change is submitted for a cor rder to change its registered	poration organize	d under the laws of the Sta	nte of Florida
1 The name	of the corporation: Bound E	ly Beauty Inc.		
2. The princi	pal office address: 10108 N	e 1st Ave		
		hores, FL 33138		
3. The mailin	ng address (if different):			
4. Date of inc	corporation/qualification:	09/01/2016	Document number:	N16000008669
5. The name	and street address of the currepartment of State: (If resigne	ent registered ager	nt and registered office on	file with the
	UNITED STATES CORPO	DRATION AGENTS	, INC.	<u>.</u>
	5575 S. Semoran Blv	rd · Suite 36		
	Orlando, FL 32822	<del>-</del>		
6. The name (if change	and street address of the new	registered agent (	if changed) and /or registe	ered offices
	InCorp Services, Inc.			<del></del> ;
	17888 67th Court No			. w
	Loxahatchee, FL 334		OT acceptable	رز ب
The street a	ddress of its registered officwill be identical.	e and the street ad	dress of the business offi	ce of its registered agent.
Such change authorized t	e was authorized by resoluti by the board, or the corporat	on duly adopted b ion has been notif	y its board of directors or ied in writing of the chan	r by an officer so ige.
	11110		Douglas Barnes, Direc	ctor
I hereby acc I further ag of my duties document is	gnature of an officer or director cept the appointment as regi ree to comply with the provi s, and I am familiar with and s being filed merely to reflec i has been notified in writing	stered agent and sions of all statut I accept the oblig t a change in the g of this change.	Printed or typed to agree to act in this capac as relative to the proper of ation of my position as re registered office address,	
Poul	Ma		August 1	1, 2020
	Signature of Registered Agent n behalf of an entity: Sillyman on behalf of In	Corp Services	Date , Inc.	
<del></del>	Typed or Printed Name	<del></del>		
	*	* * FILING FEE	: \$35.00 * * *	(H20000278541 3)