P00000016162

(Req	uestor's Name)	
(Addi	ress)	
(Addı	ress)	·
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	





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T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ALFRED ANGELO - THE BRIDE'S STUDIO NO. 1, INC.

Name of Corporation

POGUMENT NUMBER P0000016162

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:

Name of Contact Person

Registered Agents Legal Services
Firm/Company

1220 N Market Street, #806

Address

Wilmington, DE 19801

City/State and Zip Code

KSORDINI @ ALFRED ANGELO. COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise Fowler

Name of Contact Person

Name of Contact Person

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

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: ALFRED ANGELO - THE BRIDE'S STUDIO NO. 1, IN	۷C.
2. The principal office address: 393 N Congress Avenue, Boynton Beach, FL 33436	
3. The mailing address (if different): 1301 Virginia Drive, Suite 110, Fort Washington, F	•A
4. Date of incorporation/qualification: 02/15/2000 Document number: P00000016162	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Registered Agents Legal Services, Inc.	
155 Office Plaza Drive, Suite A	.: Siyii
Tallahassee, FL 32301	STON OF C
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Registered Agents Legal Services, LLC	
155 Office Plaza Drive, Suite A	
Tallahassee, FL 32301	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	agent,
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.	
Signature of an officer or director Printed or typed name and title	eNT _
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 registere 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.	ed
Disconstruction of Registered Agent O'lo:13 Date	
If signing on behalf of an entity:	
Denise Fowler Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *