P00000040766

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: Vivant Skin Care, Inc. (Name of corporation)
DOCI	UMENT NUMBER: P00000040766
	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Sara Fulton (Name of contact person)
	Vivant Skin Care, Inc. (Firm/Company)
	1801 Coral Way; Suite 300(Address)
	Miami, Florida 33145 (City/state and zip code)
For fu	rther information concerning this matter, please call:
Hanze	Rubi at (305) 285-5525 x16 (Name of contact person) (Area code & daytime telephone number)
Enclos	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaînes StreetTallahassee, FL 32314Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida	3		
1. The name of	the corporation: Vivant Skin Care, Inc.			
2. The principal	office address: 1801 Coral Way; Suite 300; Miami, Florida 33145		<u></u> _	
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 4/19/2000 Document number: P00000040760	6		
	d street address of the current registered agent and registered office on file with the rtment of State:			
	Sara Fulton	JAT 38	80	
	937 Crandon Blvd.	CRET	JAN	T
	Key Biscayne, Florida 33149	AUSSI AUV	24	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	OF STATE	AH 8: 56	Ü
	Sara Fulton	Ď'''	٠.	
	1801 Coral Way; Suite 300			
	(P.O. Box NOT acceptable) Miami, Florida 33145			
_	ress of its registered office and the street address of the business office of its regilable identical.		igent,	
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change.	er so		
(Signat	ture of an officer or director) (Printed or typed name and title)			
I hereby accept I further agree of my duties, an document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete nd I am familiar with and accept the obligation of my position as registered age ing filed merely to reflect a change in the registered office address, I hereby con to been notified in writing of this change.	perform nt. Or, nfirm th	mance if this at the	<i>?</i>
<u> </u>	ignature of Registered Agent) (Date)			
If signing on be	ehalf of an entity:			
Vivants	Typed or Printed Name)			

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