P00000083310

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL.
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	
	,

Office Use Only



900215320169

12/27/11--01039--001 **35.00

11 DEC 27 PM 4: 00

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Bo's Barber Shop, Inc.	
Name of Corporation	
DOCUMENT NUMBER: P00000083310	
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:	
Steve Regalbuto Name of Contact Person	
Name of Contact Person	
Firm/Company	
3130 NW 66th Street	
Address	
Fort Lauderdale, FL 33309	
Fort Lauderdale, FL 33309 City/State and Zip Code	
the state of the s	
smmoore21@aol.com	
smmoore21@aol.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Steve Regalbuto at (954) 984-0915 Name of Contact Person Area Code & Daytime Telephone Numb	
Name of Contact Person Area Code & Daytime Telephone Numb	er
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Street Address: Amendment Section Amendment Section	
Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (8/05)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.6 nge is submitted for a corp r to change its registered o	oration organized		of Florida	his ———	-
1. The name of t	he corporation: Bo's Ba	rber Shop, Ir	nc.			
2. The principal	office address: 2635 No	rth Federal Hig	hway, Fort Lauderdal	e, FL 3330	6	
			· -,			
3. The mailing a	ddress (if different):					
4. Date of incorp	ooration/qualification:	8/30/2000	Document number:	P000000)83310)
	street address of the current truent of State: (If resigned		and registered office on file	e with the		
	Turnquist, David Jan	nes		<u>_</u>		
	118 Lake Emerald D	rive #103				
	Oakland Park, FL 33	309 US				
6. The name and (if changed):	street address of the new r	egistered agent (if	changed) and /or registered	d office	11 DEC	SECRE
	Regalbuto, Steve	· · · · · · · · · · · · · · · · · · ·			27	SAN CHANGE
	3130 NW 66th Stree				2	DRPO
	Food Louis and the Flori	P.O. Box NOT acce	otable		Ë	RATI
	Fort Lauderdale, FL	33309 US				SHO
The street addre as changed will	ss of its registered office a be identical.	and the street addr	ess of the business office	of its register	red agen	ıt,
Such change wa authorized by th	is authorized by resolution the board, or the corporation	n duly adopted by n has been notifie	its board of directors or by d in writing of the change	y an officer s	o	
. •/	e of an officer or director		David Turnau Printed or typed nathe	and title		-
I hereby accept I further agree to of my duties, an document is bein corporation has	the appointment as regists o comply with the provision of I am familiar with and a ng filed merely to reflect a been notified in whiting o	ered agent and ag ons of all statutes accept the obligati I change in the reg of this change.	ree to act in this capacity, relative to the proper and on of my position as regis ristered office address, I h	complete per tered agent tereby confirm	rforman Or, if th n that th	ice his he
Sign	nature of Registered Agent	{} _	12/22/1 Date / 1	<u> </u>		-
If signing on be	half of an entity:					
Ту	rped or Printed Name					

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

KS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)