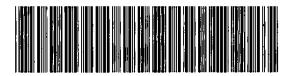
## P00000101813

(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



500163407595

12/11/09--01016--001 \*\*35.00

RA Ro Chy

09 DEC 11 PM 3: 37

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

CUDICA	Nouveau Cosmet	ique USA Inc	
SUBJECT:	Nouveau Cosmet	Corporation	
DOCUMENT NUMBER	:P00	000101813	
The enclosed Statement of	Change of Registered Office	ce/Agent and fee are sub	mitted for filing.
Please return all correspon	dence concerning this matte	er to the following:	
	<b>Gerald</b> Name of Co	Grennan ontact Person	
		Grennan ompany	
	189 S. Orange A	venue, Ste. 1600	
	Orlando,	ress FL 32801	
	City/State a	nd Zip Code	
E-mai	l address: (to be used for	future annual report no	otification)
For further information co.	ncerning this matter, please	call:	
	Grennan	at (407)	896-4931 ytime Telephone Number
	c made payable to the Depar		ymme reteptione Number
Ā D P.	lailing Address: mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Clifton Buil	Section Corporations

Tallahassee, FL 32301

## 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 Statutes, this 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.
	the corporation: Nouveau Cosmetique USA, Inc.
2. The principal	office address: 189 S. Orange Avenue, Ste. 1110, Orlando, FL 32801
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 10/27/2000 Document number: P00000101813
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Steven R. Bosmer, CPA
	7540 NW 5th Street, Ste. 1
	Plantation, FL 33317
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office.
	Gerald Grennan
	189 S. Orange Avenue, Ste. 1600
	P.O Box NOT acceptable  Orlando, FL 32801
m	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, l be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signetti	TEAN ALMAND TA COW, ANDRE FIVE. Printed or types hame and title
I hereby gocept I further agree of my duties, ar document is be	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 performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
Leur	gnature of Registered Agent 12- 9-0 9 Date
If signing on be	ehalf of an entity:
Gerale	d c Crennan Typed or Printed Name

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