

PO1000005095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

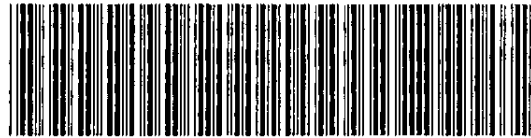
(Business Entity Name)

(Document Number)

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05/18/11--01007--005 \*\*35.00

2011 MAY 18 AM 9:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*POK*  
*5/25/11*

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: INSIDE OUT SKIN CLINIC INC.  
Name of Corporation

DOCUMENT NUMBER: P01000005095

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:

CHARYL RADLOFF  
Name of Contact Person

INSIDE OUT SKIN  
Firm/Company

2325 @ COLDSTREAM DR.  
Address


WINTER PARK FL. 32792  
City/State and Zip Code

INSIDEOUTSKIN@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARYL RADLOFF. at ( 407 ) 920-4858  
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

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

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 FLORIDA  
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: INSIDE OUTSKIN CLINIC INC.
2. The principal office address: 2325 COLDSTREAM DR.  
WINTER PARK FL. 32792
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1/12/2001 Document number: P01000005095
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)

JOSEPH PANTL

710 W. MARSH BLVD #200

WINTER PARK FL. 32789

6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):

CHARYL RADLOFF

2325 COLDSTREAM DR.

P.O. Box NOT acceptable

WINTER PARK FL. 32792

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The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

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.

X Charly Radloff  
Signature of an officer or director

CHARYL RADLOFF  
Printed or typed name and title

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 registered 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.

X Charly Radloff  
Signature of Registered Agent

5/16/2011  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)