## Moore and Polodoullos Waksler, P.L., Attorneys at Law

1625 W. Marion Ave., Ste. 2 Punta Gorda, Florida 33950 Telephone: (941) 637-1955 Facsimile: (941) 637-8485 mwlaw@moore-wakslerlaw.com

Ellen S. Maher, Esq.

July 27, 2001

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Chrysalids Salon, Inc.

00000450680--0 -07/30/01--01077--007 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Sir or Madam:

Enclosed please find Change of Registered Office Form for the above corporation along with my check in the amount of \$35.00 for filing fees. Thank you for your assistance.

Sincerely,

MOORE AND WAKSLER, P.L.

Ellen S. Maher

Enclosure

O1 JUL 30 PH 3: 06
SECRETARY OF STATE
TAIL AHASSEE TUGAIDA

Mr. C

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

the undersigned corporation organized under the laws of the State of Florida Statutes,	
submits the following statement in order to change its registered office or registered agent, or both, in	
the State of Florida.  1. The name of the corporation: Chrysalids Salon, Inc.	
1. The name of the corporation: CATYSATIOS SATION, TAC.	
2. The mailing address of the corporation: 13141 McGregor Blvd.	
Suite 2, Ft. Myers, FL 33919	_
3. Date of incorporation/qualification: 6/19/01 Document number: PO100061108	•
. The name and address of the current registered agent and office:	
Ellen S. Maher, Esq.	
201 W. Marion Ave. Suiteld	-
Punta Gorda, FL 33950	
The name and address of the new registered agent (if changed) and/or registered office (if changed):	- '
(P. O. Box Not Acceptable)	
Ellen S. Maher, Esq.	
1625 W. Marion Ave. Suite 2	
Punta Gorda, FL 33950	
The street address of its registered office and the street address of the business office of its registered gent, as changed, will be identical.	_
tuch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board.	
1-25-07	
(Signature of an officer, chairman or vice chairman of the board) (Date)	•
(Printed or typed name and title)	
laving been named as registered agent and to accept service of process for the above stated for proper state of process for the above stated for proper state of the appointment as registered agent and agree to act in this capacity further agree to comply with the provisions of all statutes relative to the proper and complete erformance of my duties, and I am familiar with and accept the obligation of my position as egistered agent.	ı
7/19/11 == =	•
(Signature of Registered Agent) (Date) ない	į
signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	. 🚣 .
* * * FILING FEE: \$35.00 * * *	

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314