

P02000057349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

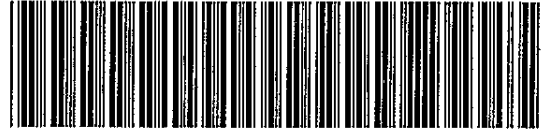
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*R.A. Charge*

G. Ocullette APR 03 2006

**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: Passion Salon + Spa, Inc.
2. The principal office address: 84 Plain View Dr Palm Coast FL 32164
3. The mailing address (if different): 9 Harbor Village way Palm Coast FL 32167
4. Date of incorporation/qualification: March 13 06 Document number: PD2000057349
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Maria Pinto  
90 Palm Harbor Village way  
Palm Coast FL 32137
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Tara Gassett  
84 Plain View Dr  
(P.O. Box NOT acceptable)  
Palm Coast FL 32164

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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.

Tara Gassett  
(Signature of an officer or director)

Tara Gassett  
(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.

Tara M Gassett  
(Signature of Registered Agent)

March 32 06  
(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)