

P02000103821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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OFFICE OF REGISTRATIONS  
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*Ra Chang*

AUG 20 2018

D CUSHING

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** New Attitude Salon, Inc.

Name of Corporation

**DOCUMENT NUMBER:** P02000103821

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:

Shawn M. Nally

Name of Contact Person

New Attitude Salon, Inc.

Firm/Company

7726 Grand Blvd.

Address

Port Richey Fl. 34668

City/State and Zip Code

angeltude371@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shawn Nally

Name of Contact Person

at ( 727 ) 844-8753

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

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STATE DEPT OF STATE  
DIVISION OF CORPORATIONS  
16 JUL 20 PM 3:37



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 31, 2018

SHAWN M NALLY  
NEW ATTITUDE SALON INC  
7726 GRAND BLVD  
PORT RICHEY, FL 34668

SUBJECT: NEW ATTITUDE SALON, INC.  
Ref. Number: P02000103821

We have received your document for NEW ATTITUDE SALON, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application must be signed by an officer and the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 218A00015764

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18 AUG 20 AM 4:16  
SECRETARY OF STATE  
TALLAHASSEE, FL

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

1. The name of the corporation: New Attitude Salon, Inc.
2. The principal office address: 7726 Grand Blvd. Port Richey, Fl. 34668
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_
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)

Shawn M. Nally

7008 Morningstar Lane New

New Port Richey, Fl. 34652

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

Shawn M. Nally

7726 Grand Blvd.

P.O. Box NOT acceptable

Port Richey, Fl. 34668

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

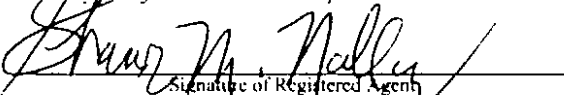
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Shawn M. Nally, President

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.*

  
Signature of Registered Agent

July 23, 2018

Date

If signing on behalf of an entity:

Shawn M. Nally

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 (03/12)

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DIVISION OF STATE  
CORPORATIONS  
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