

P03000117352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

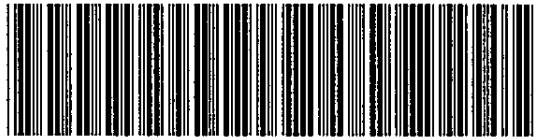
(Business Entity Name)

(Document Number)

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07 OCT 29 PM 2:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*R.A. Charge*

C. Couffette OCT 29 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** High Performance Tanning  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Heather L. Hudson  
(Name of Contact Person)

High Performance Tanning  
(Firm/Company)

6700 Conroy Rd suite 124  
(Address)

Orlando, FL 32835  
(City/State and Zip Code)

For further information concerning this matter, please call:

Heather L. Hudson at 407-299-1978 (office)  
(Name of Contact Person) (Area Code & Daytime Telephone Number)  
407-470-9971 (cell)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 19, 2007

HEATHER L. HUDSON  
HIGH PERFORMANCE TANNING, INC.  
6700 CONROY RD., STE. 124  
ORLANDO, FL 32835

SUBJECT: HIGH PERFORMANCE TANNING, INC.  
Ref. Number: P03000117352

We have received your document for HIGH PERFORMANCE TANNING, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6903.

Cheryl Coulliette  
Regulatory Specialist II

Letter Number: 507A00061610

CEIVED  
OCT 29 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: High Performance Tanning, Inc.
- 2. The principal office address: 6700 Conroy Rd suite 124  
Orlando, FL 32835
- 3. The mailing address (if different): Same
- 4. Date of incorporation/qualification: 10/3/07 Document number: \_\_\_\_\_

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Joanna M Jones  
8655 Crestgate Cir.  
Orlando FL 32819

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

Heather L. Hudson  
6700 Conroy Rd suite 124  
(P.O. Box NOT acceptable)  
Orlando, FL 32835

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

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]  
(Signature of an officer or director)

Robert L Hudson III  
(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]  
(Signature of Registered Agent)

10/3/07  
(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