

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000044916

**FILED**  
**Nov 06, 2014**  
**Secretary of State**

**Entity Name:** BUTTERFLY SALON & SPA, INC.

**Current Principal Place of Business:**

15641 SHERIDAN STREET  
SUITE: 200  
DAVIE, FL 33331 US

**New Principal Place of Business:**

**Current Mailing Address:**

15641 SHERIDAN STREET  
SUITE: 200  
DAVIE, FL 33331 US

**New Mailing Address:**

**FEI Number:** 27-0107066

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HERNANDEZ, NANCY  
15641 SHERIDAN STREET  
SUITE: 200  
DAVIE, FL 33331 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** NANCY HERNANDEZ

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PVST  
**Name:** HERNANDEZ, NANCY  
**Address:** 15641 SHERIDAN STREET SUITE: 200  
**City-St-Zip:** DAVIE, FL 33331 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** NANCY HERNANDEZ

PVST

11/06/2014

Electronic Signature of Signing Officer or Director

Date