## P04000102783

(Requestor's Name)	
	,
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
,	
(Document Number)	
Certified Copies Certificates of State	tus
Special Instructions to Filing Officer:	
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RAIRO/Change

Office Use Only

## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Flagler Skin Care INC. (Name of corporation)
DOCUMENT NUMBER: 16: 83-0402515
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:
Rita Prather (Name of contact person)
Flaghe Sky Care Ive. (Firm/Company)
202 Sea Date DR Unit G
Jund Beach Fd. 33408 (City/state and zip code)
For further information concerning this matter, please call:    A

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 409 E. Gaines Street Tallahassee, FL 32399



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 1, 2005

RITA PRATHER FLAGLER SKIN CARE, INC. 202 SEA OATS DR., UNIT G JUNO BEACH, FL 33408

SUBJECT: FLAGLER SKIN CARE INC.

Ref. Number: P04000102783

We have received your document for FLAGLER SKIN CARE 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):

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) 245-6964.

Letter Number: 605A00055106

Irene Albritton Document Specialist

## 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: Flaglee Skin Care Inc.  2. The principal office address: 202 Sea Oak DR. Unit 9
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/2004 Document number: 83-04025/5
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  Legal Zoom Nevada,
Legal Zoom / Legal Zoom Nevade, 7083 Hollywood Blod . Suite 180 44 W. Flagter St.
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):  Rita Prather
(P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)
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.
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)  Aug 29, 2005  (Date)
If signing on behalf of an entity:

(Typed or Printed Name)