

P070000099837

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5-8-09

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: GAVIOTA Salon AND SPA, Inc  
(Name of Corporation)

DOCUMENT NUMBER: P07000099837

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:

LEONARDO VIOTA SESIN, ESQ  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

5950 West 10<sup>th</sup> Avenue  
(Address)

Hialeah, Florida 33012  
(City/State and Zip Code)

For further information concerning this matter, please call:

LEONARDO VIOTA SESIN at ( 305 ) 231-7767  
(Name of Contact Person) (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

**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: GAVIOTA SALON & SPA INC.  
2. The principal office address: 12707 MIRAMAR PARKWAY, MIRAMAR,  
Florida 33076  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/7/07 Document number: P07000099837

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)

Olga Marrero  
8422 NW 140th Terr #3606  
Miami Lakes, FL 33016

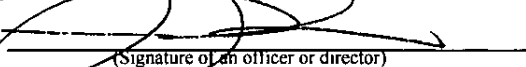
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ZORAIDA TURRIAGO  
16403 SAPPHIRE Bend  
(P.O. Box NOT acceptable)  
Weston, Florida 33331

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TALLAHASSEE, FLORIDA

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)

LEONARDO UICITA SANCHEZ, Esq.  
(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)

APRIL 20, 2009  
(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)