

P080000000008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

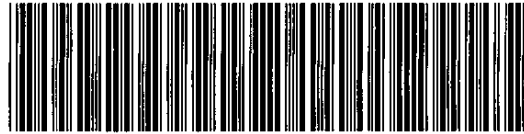
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Address Change

TB

2-13-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Glow Skin Care + Hair Removal Corp.
(Name of Corporation)

DOCUMENT NUMBER: P08000000008

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:

Vanessa Alvarenga (owner)
(Name of Contact Person)

—
(Firm/Company)

13949 SW 8 TERR.
(Address)

Miami, FL 33184
(City/State and Zip Code)

For further information concerning this matter, please call:

Vanessa Alvarenga at (786) 351.6142
(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

