P10000001598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A Better Hearing Care Salon
Name of Corporation

DOCUMENT NUMBER: P10000001598

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:

Denise Gold
Name of Contact Person

A Better Hearing Care Salon
Firm/Company

(old) 4400 NorthCorp Pkwy Suite 121
(new) 3385 Burns Rd #204
Address

Palm Beach Gardens, FL 33410
City/State and Zip Code

degold77@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise Gold at (561) 351-6768
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

CR2E045 (8/05)

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: A Better Hearing Care Salon, INC.
2. The principal office address: 4400 Northcorp Pkwy. Ste 121 Palm Beach Gardens, FL 33410
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/1/2010 Document number: P10000001598
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) Denise Gold 4400 Northcorp Pkwy Suite 121 Palm Beach Gardens, FL 33410
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Denise Gold 3385 Burns Rd. Suite 204 Palm Beach Gardens, FL 33410
   P.O. Box NOT acceptable

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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.

Denise Gold — Signature of an officer or director

Denise Gold / Pres — 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.

Denise Gold — Signature of Registered Agent

2/26/10 — 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)