## P13000092675

(Requ	iestor's Name)	
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Certified Copies	Certificates	s of Status
Special Instructions to Fil	ling Officer:	





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2014 JAN - 6 PM 2: 34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/14/14

## **COVER LETTER**

SUBJECT: Skindoctors International, Inc. Name of Corporation			
DOCUMENT NUMBER: \$130000 92675			
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:			
Charles W. Karp Jr. Name of Confact Person			
Firm/Company			
10839 Peppersong Dr.			
Riverview Fl. 33578 Eity/State and Zip Code			
Chalocts 2012@Gmail.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Clinton Paris Name of Contact Person  at (813) 413-7924 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  Street Address:  Amendment Section  Division of Corporations			

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

## 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
1. The name of the corporation: Skindocters International, Unc.  2. The principal office address: 10839 Peppersong Dr. Riverview, Fl.  33578
3. The mailing address (if different):
4. Date of incorporation/qualification: Nev 14, 2013 Document number: P1300092675  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)  Charles W. Karp, Jr.  12981 Village Blvd  Madieva Beach, Fl. 33708
6. The name and street address of the new registered agent (if changed) and /or registered office P. (if changed):  Chayles W. Kayp Jy.  10839 Pepper Sang Dy.  P.O. Box Norfacceptable  Riverview Fl. 33578
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.  Charles U. Karn Tr.  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.  Charles W. Karp. Tr.  Signature of Registered Agent
If signing on behalf of an entity:

\* \* \* FILING FEE: \$35.00 \* \* \*

Typed or Printed Name