

**P13000092675**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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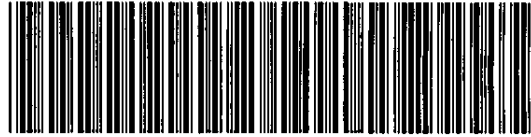
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

*[Signature]*  
1/14/14

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Skindoctors International, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P13000092675

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 Contact Person

\_\_\_\_\_  
Firm/Company

10839 Peppersong Dr.  
Address

Riverview, FL 33578  
City/State and Zip Code

Chalots2012@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Clinton Paris at ( 813 ) 413-7924  
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: SKINDOCTERS International, Inc.
2. The principal office address: 10839 Peppersong Dr. Riverview, FL 33578
3. The mailing address (if different): Same

4. Date of incorporation/qualification: Nov 14, 2013 Document number: P13000092675

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  
Madiera Beach, FL 33708

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FLORIDA

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

Charles W. Karp Jr.  
10839 Peppersong Dr.  
P.O. Box NOT acceptable  
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.

[Signature]  
Signature of an officer or director

Charles W. Karp, Jr.  
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]  
Signature of Registered Agent

Charles W. Karp, Jr.  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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