

P14000069369

A (Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

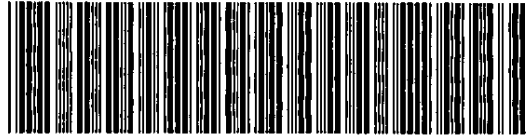
(Business Entity Name)

(Document Number)

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15 APR 10 PM 2:43  
DIVISION OF CORPORATIONS  
STATE OF CALIFORNIA

C.L.  
4-14-15

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Blue Lotus SkinSpa, Inc.  
Name of Corporation

DOCUMENT NUMBER: P14000069369

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:

Meridith Stokes  
Name of Contact Person

Blue Lotus SkinSpa, Inc.  
Firm/Company

14530 Indian Ridge Trl  
Address

Clermont, FL 34711  
City/State and Zip Code

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

For further information concerning this matter, please call:

Meridith Stokes at ( 321 ) 298-1885  
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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Blue Lotus SkinSpa, Inc.
2. The principal office address: 301 N Baker St.  
Mt. Dora, FL 32757
3. The mailing address (if different): 14530 Indian Ridge Trl  
Clermont, FL 34711
4. Date of incorporation/qualification: 8-20-14 Document number: 714000069369
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)

Meridith Theodoropoulos

(Changed Name due to Divorce)

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

Meridith Stokes  
14530 Indian Ridge Trl  
P.O. Box NOT acceptable  
Clermont, FL 34711

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.

Meridith Stokes  
Signature of an officer or director

Meridith Theodoropoulos, President  
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.*

Meridith Stokes  
Signature of Registered Agent

4/8/15  
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 (03/12)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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