

P20000094176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

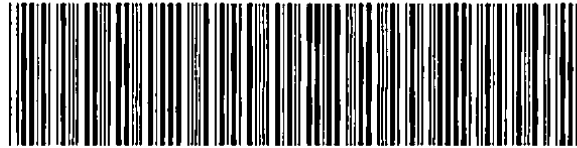
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bella Cosmetology Studio Inc
Name of Corporation

DOCUMENT NUMBER: P20000094176

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:

Jelena Milosavljevic

Name of Contact Person

Bella Cosmetology Studio Inc.

Firm/Company

14609 Sunny Waters Ln.

Address

Delray Beach, FL 33484

City/State and Zip Code

jelgru72@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jelena Milosavljevic

Name of Contact Person

at (305)

302-5600

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

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**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: Bella Cosmetology Studio Inc.
2. The principal office address: 200 West Camino Real, Boca Raton, FL 33432
3. The mailing address (if different): 14609 Sunny Waters Ln., Delray Beach, FL 33484
4. Date of incorporation/qualification: 11/30/2020 Document number: P20000094176
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)

Seruton, Philip J.

2191 NE 5th Circle

Boca Raton, FL 33431

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

Lisa L. Daniels

902 Clint Moore Road, Suite 120

P.O. Box NOT acceptable

Boca Raton, FL 33487

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.

Jelena Milosavljevic

Signature of an officer or director

Jelena Milosavljevic

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.

Lisa L. Daniels

Signature of Registered Agent

11/3/2024

Date

If signing on behalf of an entity:

Law Offices of Lisa L. Daniels, P.A.

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 (04/13)

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TALLAHASSEE, FL

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