P97000010612

(Re	questor's Name)	
	dress)	
(/ 14	aress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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SECRULIANT OF STATE
SECRULIANT OF STATE
AND ANASSEE, FLORIDA

PHch9 CRG-10

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Avante Stylist, Inc. (Name of Corporation)
DOCUMENT NUMBER: P97-000010612
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:
Thaluma Palma
(Name of Contact Person)
Avante Stylist, Inc. (Firm/Company)
Miami, Florida 33175 (City/State and Zip Code) For further information concerning this matter, please call:
(Address)
Miami, Florida 33175
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at ((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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Avante Stylist, Inc.
2. The principal	office address: 13635 SW 26 St.
Miami, Flori	da 33175
3. The mailing a	nddress (if different):
4. Date of incor	poration/qualification: 02/03/1997 Document number: P97-000010612
	d street address of the current registered agent and registered office on file with the rtment of State:
	Felix Alfonso
	13635 SW 26 St.
	Miami, Florida 33175
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered officers
	Thaluma Palma
	13635 SW 26 St.
	(P.O. Box NOT acceptable) Miami, Florida 33175
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
4 Signat	are of an officer sale of the control of the contro
	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance tal I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speen notified in writing of this change.
— St	gnature of Registered Agent) (Date)
If signing on be	half of an entity:
	Typed or Printed Name)

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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