

L130000078350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

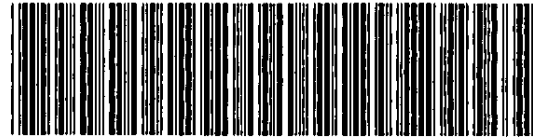
(Business Entity Name)

(Document Number)

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2013 JUN 28 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FL 09111A

B. BOSTICK

JUL - 1 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SKINOMETER, LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NIV SHKOLNIK

Name of Person

SKINOMETER, LLC

Firm/Company

19501 W COUNTRY CLUB DR #1612

Address

AVENTURA, FL 33180

City/State and Zip Code

NIVSHK@GMAIL.COM

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

For further information concerning this matter, please call:

NIV SHKOLNIK

386 5766586

at ()

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SKINOMETER, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/23/2013 and assigned
Florida document number L13000078350.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida** _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

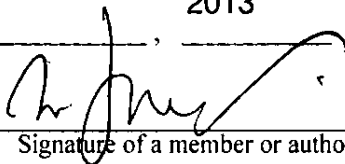
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F11
ADD
REMOVE

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

MGR SHKONIK, NIV

NAME SHOULD READ - SHKOLNIK, NIV

Dated 06/12, 2013



Signature of a member or authorized representative of a member

Niv Shkolnik

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2013

NIV SHKOLNIK
19501 W. COUNTRY CLUB DRIVE #1612
AVENTURA, FL 33180

SUBJECT: SKINOMETER, LLC
Ref. Number: L13000078350

We have received your document for SKINOMETER, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 313A00015275

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TALLAHASSEE, FLORIDA