L23000278428

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000350297 3)))

H25000350297ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

2025 SEP 30 PM 4:50
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2025 SEP 30 PM 11:26
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LUMIERE WELLNESS CONCIERGE LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$25.00

RECEIVED

Electronic Filing Menu Corporate Filing Menu Help

Articles of Amendment to LLC Articles of Organization of

Lumiere Wellness Concierge

The Articles of Organization for this Limited Liability Company were filed on 1-20-23 and assigned Florida document number L23000028828

This amendment is submitted to amend the following:

Change principal address to:
6625 Miami Lakes Dr. STE 375
Miami Lakes, FL 33014

2025 SEP 30 FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

These articles of amendment were adopted on 9/30/25.

Dated 9/30/25

Signature of a member or authorized representative of a member

Mariolis Rodriguez

Typed or printed name of signee

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing