# LOUUUU12440

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B. KOHR

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**EXAMINER** 

## **COVER LETTER**

TÓ:	Registration Sect Division of Corpo		•	• • • • • • • • • • • • • • • • • • •	
SUBJE	ECT:	CA	T 2, LLC ^		
			ted Liability Company		
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.		To Contract
Please	return all correspond	dence concerning this matter	to the following:		10 Sto 28 PA WES
		N	ATALIE M. ROGERS		74 ·
			Name of Person		ో
			SKINFINITE		
			Firm/Company		
		3428	N. ROOSEVELT BLV	D	
			Address		
		KEY	WEST, FLORIDA 3304	10	
			City/State and Zip Code		
		SKIN	FINITEKW@AOL.COM  o be used for future annual report	A	
		·	•	nonneadon)	
For fur	ther information cor	ncerning this matter, please c	all:		
	NATALII	E M. ROGERS	at (_305 )	294-8284	
	Name of I	Person		aytime Telephone Number	
Enclos	ed is a check for the	following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certified	te of Status &

### 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ON	10 to	ON THE
	~~ ~~	
s on our	records.)	10 10 10 10 10 10 10 10 10 10 10 10 10 1

	CAT 2, LLC		Con Party
(Name of the Limite	d Liability Company as it now appea A Florida Limited Liability Company)	ers on our records.)	Cy Co
The Articles of Organization for this Limited	Liability Company were filed on	10/12/2000	and assigned
Florida document numberL0000001	12440		
This amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :	
	SKINFINITE, LLC		
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Comp	any," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)	·····	
Enter new mailing address, if applicable:			
• • • • • • • • • • • • • • • • • • • •			<del></del>
(Mailing address MAY BE A POST OFFICE	<u> </u>	<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter t	he name of the nev
Name of New Registered Agent:	NATALIE M. ROGERS		
New Registered Office Address:			
•	Eı	nter Florida street add	ress
		. 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

Page 1 of 2

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 **Title** <u>Name</u> **Address Type of Action** MGR NATALIE M. ROGERS 3428 N. ROOSEVELT BLVD ☑ Add Remove **KEY WEST, FLORIDA 33040** ☐ Add Remove ☐ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **SEPTEMBER 20** 2010 Dated\_ Signature of a member or authorized representative of a member **ELIZABETH M. CATANA** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00