## W50000 82528

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	7)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	9)
(Do	cument Number)	<del></del>
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Registration Division of			
SUBJECT:	YOUR ULTIMP	TE IMAGE, LLC Limited Liability Company)	,
	s of Amendment and fee(s) are su espondence concerning this matter	•	
	DONNA L.	HILTEBEITEL (Name of Person)	
		1ATE MAGE CC (Firm/Company)	
	8075 S. BE	(Address)	• • •
	SARASOTA, F	y/State and Zip Code)	-8 CA 9: 37AIE
For further information	on concerning this matter, please	call:	Su v
RIAN	Name of Person)	at (941) 92 (Area Code & Daytim	25-0303 e Telephone Number)
Enclosed is a check for			
\$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)
MA	H INC ADDRESS.	STOFFT/COURT	FB ANNDFSS.

MAILING ADDRESS:

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	YOUR ULTIMATE IMAGE, LLC	
	(Present Name) (A Florida Limited Liability Company)	
FIRST:	The Articles of Organization were filed on OB 19105 and assigned document number 05 00000 32528.	
	-, -, -, -, -, -, -, -, -, -, -, -, -, -	
SECOND:	This amendment is submitted to amend the following:	
	NAME CHANGE FROM YOUR ULTIMATE	
	IMAGE, LLC TO YOUR ULTIMATE IMAGE	
	MedSpa, LLC	
		~ <b>1</b> .
		7
		1
	350 cm	
Dated F	3 , 2006.	
	Donna L. Hiltebritch	
	Signature of a member or authorized representative of a member	
	DONNA L. HILTEBEITEL	
	Typed or printed name of cionea	

Filing Fee: \$25.00