

L05000108407

(Requestor's Name)

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08 OCT 29 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

OCT 30 2008

EXAMINER



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : 072100000032

REFERENCE : 771570 7498390

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : October 27, 2008

ORDER TIME : 5:50 PM

ORDER NO. : 771570-005

CUSTOMER NO: 7498390

FILED  
08 OCT 29 AM 10:15  
TALLAHASSEE, FLORIDA

DOMESTIC AMENDMENT FILING

NAME: RENEW UNISEX SALON & SPA, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Joyce Markley -- EXT# 2930

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

RENEW UNISEX SALON & SPA, LLC

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

FILED  
08 OCT 29 AM 10:15  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/8/05 and assigned  
Florida document number L05000108407

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)

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>
<u>mgrm</u>	<u>ANA M. AZUCENA</u>	<u>W.</u> <u>6911 124TH STREET APT 1402</u> <u>OVERLAND PARK KS 66209</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>mgrm</u>	<u>MELVIN O. RODGERS</u>	<u>201 S.E. 15TH TERRACE STE 104</u> <u>DEERFIELD BEACH FL 33441</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>      </u>	<u>      </u>	<u>      </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>      </u>	<u>      </u>	<u>      </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>      </u>	<u>      </u>	<u>      </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>      </u>	<u>      </u>	<u>      </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Reconfirming:  
Removing → Ana  
Adding → Melvin  
as described above

Dated \_\_\_\_\_

  
Signature of a member or authorized representative of a member

Ana M. Azucena  
Typed or printed name of signer