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SECRETARY OF STATE
DIVISION OF CORPORATIONS
OF OCT 12 PH 2: 54

J. BRYAN OCT 1 3 2006

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: PALM BEACH MED SPA LLC. (Name of Limited Liability Company)	· <u> </u>
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	DIVIS 06
Anand Patel. (Name of Person)	OCT 12
Palm Beach Med Spa Lic.	SECRETARY CORPORATIONS IN ISION OF CORPORATIONS OF OCT 12 PH 2: 54
4354 Okee Chobee Blvd. (Address)	
West Palm Boach Pl 33409. (City/State and Zip Code)	
For further information concerning this matter, please call:	
Anand Patel at (S61) 317 43 (Name of Person) (Area Code & Daytime Telephone N	iumber)
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified Copy	Filing Fee, of Status & Copy Il 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		PALM	BEACH		SPA	Lic	
			(A Florida	(Present Name Limited Liabilit	) y Company)		
	•						06
							e e
FIR	ST:	The Articles of Org document number 1	anization were filed	on <u>O8/2</u> 2550.	1/2006	and assign	06 OCT 12 PH 2
SEC	COND:	This amendment is	submitted to amend t	he following:			2:
		Name C	hange f	rom /	Anand	Patel	
			ne - Pi				
			ma A				
		To be che	unged for	Regist	ered f	Jaent	and
-		Manager	Member	Detai	 人	<del>.</del>	
•		9					
		Above in	rformatio	» /v](i, t)	- coioù	2011	
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		UNCGARCE	y inpu	<u>e</u>			
Date	ed	October 5	; en , 20	<u> </u>			
				V	M	<u> </u>	
		Si	gnature of a member of	or authorized re	desentative of a	n member	
			ANAND	PATE	<u> </u>		
			Typed o	r printed name.	OT CLOBAA		

Filing Fee: \$25.00