

LO70000 32722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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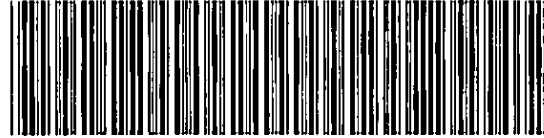
(Business Entity Name)

(Document Number)

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2020 SEP 16 PM 4:36

OCT 24 2020  
S. YOUNG

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BEAUTY ANGELS USA LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SCOT ROSENBERG

\_\_\_\_\_  
Name of Person

BEAUTY ANGELS USA, LLC

\_\_\_\_\_  
Firm/Company

9748 RENNES LANE

\_\_\_\_\_  
Address

DELRAY BEACH, FL 33446

\_\_\_\_\_  
City/State and Zip Code

scotrosenberg@aol.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scot Rosenberg

561 376-9582  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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)

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

DREAMLIFE LLC

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

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The Articles of Organization for this Limited Liability Company were filed on 03/19/2010 and assigned  
Florida document number L07000032722

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

BEAUTY ANGELS USA LLC

The new name must be distinguishable and contain 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)**

1200 S ROGERS CIRCLE

BOCA RATON, FL 33487

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1200 S ROGERS CIRCLE

BOCA RATON, FL 33487

**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:

SCOT ROSENBERG

New Registered Office Address:

1200 S ROGERS CIRCLE

*Enter Florida street address*

BOCA RATON

Florida 33487

*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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SCOT ROSENBERG	9748 RENNES LANE	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33473	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GLEN ROSENBERG	11940 FOX HILL CIRCLE	<input type="checkbox"/> Add
		BOYNTON BEACH, FL 33473	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	KLER ROSENBERG	9748 RENNES LANE	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33473	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

SEPTEMBER 9, 2020

Typed or printed name of signee