

LOS ANGELES 475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

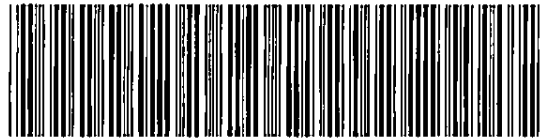
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL  
JUL 15 PM 1:02

S. BLUNT

07/15/24

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THE MASSAGE & SKINCARE BOUTIQUE 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:

SHARON LUONGO

Name of Person

Firm/Company

3810 S KANNER HWY UNIT 1223

Address

STUART, FL 34994

City/State and Zip Code

LUONGO66@GMAIL.COM

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

For further information concerning this matter, please call:

SHARON LUONGO

954

305.3719

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**

THE MESSAGE & SKINCARE BOUTIQUE LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/21/2008 and assigned  
Florida document number 108000050775.

This amendment is submitted to amend the following:

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

KL CONSCIOUSNESS LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3810 S KANNER HWY UNIT 1223

STUART, FL.

34994

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3810 S KANNER HWY UNIT 1223

STUART, FL.

34994

**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:

3810 S KANNER HWY, UNIT 1223

*Enter Florida street address*

STUART

Florida 34994

*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




15 PM 1:02  
FALL Y CO SITE  
WILMINGTON, FL

15 JUL 1:02  
MAIL ROOM STATE  
MAIL ASSOCIATE, FL

(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.

  
Signature of a member or authorized representative of a member

Typed or printed name of signee