Division of Corporations Electronic Filing Cover Sheet

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SHAPES, LLC		
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on mited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Co Florida document number <u>L09000012469</u>	mpany were filed on 02/06/	2009 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
BODY HARMONIE ANTI-AGING CENT	ER LLC	
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Company," (he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		1 4 4 4
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida 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 = M MGRM =	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
	<u> </u>		Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			DIVERGRE SACRE MAY
			<u> </u>
			CORPAND THE LED
			Y OF STATE OR PARATIONS
			Add
			Remove

lf amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
N 4 A	V 47 0640
_{ed} IVIA	Y 17 <u>2</u> 013.
	Signature of a member or authorized representative of a member
	JEAN MARIO PIERRE /
	Typed or printed name of signee
	Dago 2 of 2

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SECRETARY OF SIATE SIGNEDIVISION OF CORPORATIONS