<u>ما 10 ما 20 م</u>

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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EXAMINER



500159101725

08/31/09--01030--006 **25.00

COVER LETTER

TO: Registration Sec Division of Corp	tion orations				
SUBJECT:					
	Name of Limit	ted Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
		Federico Sanchez			
		Name of Person			
i dita		Î.!.C. CAPITAL LLC			
		Firm/Company			
280 WOODCREST RD					
		Address			
	KEY	' BISCAYNE, FL 33149			
City/State and Zip Code					
	fsanchez@menscience.com E-mail address: (to be used for future annual report notification)				
For further information co	ncerning this matter, please c		attony		
Feder Name of	rico Sanchez	at (305) 3 Area Code & Daytime	361.0994		
Name of	rerson	Alea Code & Dayline	reteptione numoei		
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)	S60.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	A AND BODY F			
(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now app nited Liability Company	y)		
The Articles of Organization for this Limited Liability Com Florida document numberL09000026106	npany were filed on _	MARCH 17, 2009	_ and assigne	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company l	<u>iere</u> :		
Femme	Science L.L.C			0
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Con	npany," the designation "LLC	or the bbre	TRISION
Enter new principal offices address, if applicable:			()	2
(Principal office address MUST BE A STREET ADDRES	(2.2)		<u></u>	
			프	중위
	_		بې	EST ST
Enter new mailing address, if applicable:			59	증류
(Mailing address MAY BE A POST OFFICE BOX)				- 1 m
1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, enter the	name of th	<u>ne new</u>
Name of New Registered Agent:	-			
New Registered Office Address:				
		Enter Florida street addres	s	
	, 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 **Type of Action** Title **Address** <u>Name</u> ☐ Add Remove ☐ Add Remove _ Add Remove ∏Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 26th Dated ____ MANAGING MEMBER Signature of a member or authorized representative of a member Federico Sanchez / L.I.C CAPITAL Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00