L10000007893

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(Address)						
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10/25/10--01016--010 **25.00



J. BRYAN

OCT 2 5 2010

EXAMINER

COVER LETTER

TO:	Registration Secti Division of Corpo			
SUBJ	ест:А_	New USPa Co Name of Limit	ed Liability Company	
The er	closed Articles of Ar	nendment and fee(s) are sub	nitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
		Angel	a Singletur Name of Person	
		A Neu	U Spa LLC Firm/Company	
		<u>641 W.</u>	Fair Danks Ave, #	TALLAMASSEE, FLORIDA TO DCT 25 PM 2: 34 TALLAMASSEE, FLORIDA TO DCT 25 PM 2: 34
			Vinter Park FL 37 City/State and Zip Code	2789 25 PH 2
		E-mail address: (to	o be used for future annual report notificat	tion) 32
For fu	rther information con	cerning this matter, please ca	all:	P
	Angela S Name of F	erson	at (<u>407) </u>	27 elephone Number
Enclo	sed is a check for the	following amount:		
□ /\$2	5.00 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)
	MAII 15	IC ADDDESS.	empret/colinie	D ADDRESS.

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 New U S	pa LLC					
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	_				
	Pig 8	7				
The Articles of Organization for this Limited Liability Company were filed on O1-22-10						
Florida document number <u>L1000000 7893</u> .						
	Fric.					
This amendment is submitted to amend the following:		PH 2: 35				
_		ू उ				
A. If amending name, enter the new name of the limi	ed liability company here:					
•						
The new name must be distinguishable and end with the wor "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abl	oreviation				
Enter new principal offices address, if applicable:	641 W Fairbanks Ave Suite 220					
(Principal office address MUST BE A STREET ADDR	ESS) Suite 220					
	Winter Park & 32789					
Enter new mailing address, if applicable:	1303 W7thSt					
(Mailing address MAY BE A POST OFFICE BOX)	Sanford FL 32771					
B. If amending the registered agent and/or regist	ered office address on our records, enter the name of	the new				
registered agent and/or the new registered office add	ess here:					
		•				
Name of New Registered Agent:	,					
N	n 2 w 7th St					
New Registered Office Address:	Enter Florida street address					
	ian ford , Florida 3277 1 City Zip Code					
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = Managing Member

Title Name Address Type of Action

MGR Deanette Bascleo 407 Lake Howell Rd, 107 Add Maitland, A 32751 Remove

Add Remove

Add Remove

Add Remove

D. If amending any other information, enter change(s) here: (Attach adaitional sheets, if necessary.)	<u> </u>	0
	- O	000
		1 25
	#71 771 € 171 €	PH
	LORIDA	?
	DA.	္သ
Dated October 19, 2010.	-	
Signature of a member or authorized representative of a member		_

Page 2 of 2

Angula Singleton
Typed or printed name of signee

Filing Fee: \$25.00