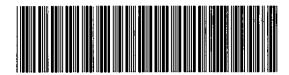
L10000035974

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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SEURETARY OF STATE ALLAHASSEE, FLORIDA

T. HAMPTON

NOT = A REST

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor		
SUBJ	ÉCT:	AT PROPERTY MANAGEMENT, LLC	
		Name of Limited Liability Company	
The er	iclosed Articles of	Amendment and fee(s) are submitted for filing.	
Please	return all correspo	ndence concerning this matter to the following:	
	Adriana Tavone		
		Name of Person	
		Firm/Company	
		3001 W. Hallandale Beach Blvd, #300	
		Address	
		Pembroke Park, FL 33009	
		City/State and Zip Code	
	atavone1010@yahoo.com E-mail address: (to be used for future annual report notification)		
For fu	rther information co	ncerning this matter, please call:	
		ana Tavone at (954) 769-9102	
	Name of	Person Area Code & Daytime Telephone Number	
Enclos	ed is a check for th	e following amount:	
√ \$25	5.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	1)

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

FILED 2011 NOV - 1 PM 1:59

SECKETARY OF STATE TALLAHASSEE, FLORIDA

AT PROPERTY MANAGEMENT, 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	April 1, 2010	and assigned	
Florida document numberL10000035974	<u></u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company h	ere:		
EUROPEAN BE	EAUTY DISTRIBUTIO	N, LLC		
The new name must be distinguishable and end with the we"L.L.C."	ords "Limited Liability Com	pany," the designation "LL	C" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	ORESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
ming min say the bond				
	 			
B. If amending the registered agent and/or registered agent and/or the new registered office ade		our records, enter the	e name of the new	
registered agent and/or the new registered office ad-	uress nere:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida 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

. 8

MGR = Manager

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:

MCKM - M	anaging Member		
Title	<u>Name</u>	Address	Type of Action
MGRM	Adriana Tavone	3001 W. Hallandale Beach Blvd #300 Pembroke Park, FL 33009	Add Remove
MGRM_	John Tavone	3001 W. Hallandale Beach Blvd #300 Pembroke Park, FL 33009	Add Remove
			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	_
		TÄLLAHASS	FILI 2011 NOV -1
Dated	October 24 , 20°	LOKIUA 11	PH 1:59
-	Signature of a mambar	or authorized representative of a member	
		driana Tavone	
-		or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00