

L10000037985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

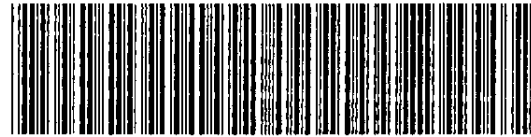
(Business Entity Name)

(Document Number)

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2011 MAR -7 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

MAR 8 2011

EXAMINER

COVER LETTER

Division of Corporations

P.O. Box 6327

Tallahassee, Fla. 32314

Re: Change of Name of LLC

New Name: Skin Love LLC

Dear Sir or Madame,

My name is Lyudmila Kirilova. I am a managing member of Esthetician Strategies LLC.

Enclosed are Articles of Amendment to Articles of Organization. Please change the name of the LLC to Skin Love LLC.

Enclosed is a check for \$30 for a filing fee and certificate of status.

My daytime telephone is 561 654 4590 and my return address is 6611 Spring Bottom Way, Boca Raton, Florida 33433. Please send my certificate of status to this address.

Thank you for your help and cooperation.

Sincerely,

Lyudmila Kirilova

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Esthetician Strategies 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:

Lyudmila Kirilova
Name of Person

Firm/Company

6611 Spring Bottom Way
Address

Boca Raton, Fla. 33433
City/State and Zip Code

milabocal@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

x Lyudmila Kirilova at (561) 654-4590
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/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 MAR -7 PM 2:32

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04-07-2010 and assigned
Florida document number L10000037985

This amendment is submitted to amend the following:

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

SKIN LOVE LLC (SKIN LOVE LLC)

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2011 MAR -7 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

X Dated 03.01.11

X *Ljudmila Kirilova*
Signature of a member or authorized representative of a member
Ljudmila Kirilova
Typed or printed name of signee