

L10000091826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

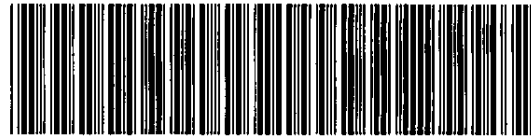
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/27/10--01003--015 \*\*55.00

FILED  
10 SEP 27 AM 11:31  
TALLAHASSEE, FLORIDA

S. HAWKES

SEP 28 2010

EXAMINER

FERO COSMETICS LLC

8461 Lake Worth Road # 103

Lake Worth FL 33467

I would like to file an amendment for the above company, please see attach documents. Also I would like an original copy of the documents I did not received. Please forward with changes of amendment for my record.

Thanks,

Molton Michel.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FERO COSMETICS 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:

MICHEL MOLTON

Name of Person

FERO COSMETICS LLC

Firm/Company

8461 LAKE WORTH ROAD SUITE # 103

Address

LAKE WORTH FL 33467

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHEL MOLTON

Name of Person

at ( 561 )

622-5025

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**

**FERO COSMETIC 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 08/27/2010 and assigned  
Florida document number L10000091826.

This amendment is submitted to amend the following:

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

**FERO COSMETICS 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:**

8461 LAKE WORTH ROAD SUITE # 103

**(Principal office address MUST BE A STREET ADDRESS)**

LAKE WORTH FL 33467

**Enter new mailing address, if applicable:**

8461 LAKE WORTH ROAD SUITE # 103

**(Mailing address MAY BE A POST OFFICE BOX)**

LAKE WORTH FL 33467

**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

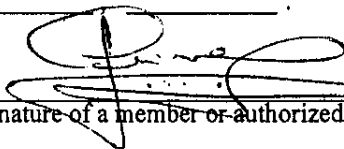
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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FBI - SEATTLE

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


Dated 9/22/10

  
Signature of a member or authorized representative of a member

MOLTON MICHEL

Typed or printed name of signee