11/000/02835

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SECRETARY OF STATE
ALLAHASSEE, FI TAIE

J. SAULSBERRY EXAMINER SEP 26 2011

COVER LETTER

TO:	Registration Sectorial Division of Corporation				
SUBJE	ECT:	Beau	ty Pearl LLC		
			ted Liability Company		_
The end	closed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please	return all correspond	dence concerning this matter	to the following:		
			isette Salazar, Esq	J.	
			Name of Person		
		Li	sette Pie Salazar P	Α	
			Firm/Company		
_		200 Crandon Blvd. Suite 311			
			Address		
		Ke	y Biscayne, Fl. 331	49	ZOII SEP 23 SECRETARY ALLAHASSE
			City/State and Zip Code		HARET SEP
		E-mail address: (t	salazarlaw@aol.cor o be used for future annual re	n eport notification)	ARY SSEE
For furt	ther information con	cerning this matter, please c	•		
	Lisette	Salazar, Esq.	at (_305)	361-6161	8: 57
	Name of F	Person		& Daytime Telephone Nun	ber
Enclose	ed 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) Certif	Filing Fee, icate of Status & fied Copy ical copy is enclosed)
	Registrati Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, FL 32314	Registrati Division o Clifton Bo 2661 Exe	C/COURIER ADDRESS on Section of Corporations uilding cutive Center Circle ee, FL 32301	:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Be	auty Pearl LLC		·
(<u>Name of the Limited Liabili</u> (A Florida	Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	09/08/2011	and assigned
Florida document numberL11000102835	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Comp	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·		7, 2
(Principal office address MUST BE A STREET ADD	RESS)		
			ARE ST
			SSE SSE
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			<u>87</u> 5
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter</u>	the name of the nev
Name of New Registered Agent:			· ·
New Registered Office Address:			
	En	nter Florida street add	lress
		, 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 Name <u>Address</u> **Type of Action** <u>Title</u> Jorge Roberto Gonzalez mgr 485 Brickell Ave. Suite 3506 _ Add Miami, Fl. 33129 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.) September 20 2011 Dated_ Signature of a-member or authorized representative of a member Lisette Salazar, Esq.

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00