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B. KOHR

SEP-6 2012

EXAMINER

COVER LETTER ...

TO: Registration S Division of Co			,
SUBJECT:	Cosmetic Surg	ery Management LLC	
	_	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Lucy Chua	12 SEP -4 PH S: 48
		Name of Person	
	Cosmetic Surgery Management LLC		
		Firm/Company	<u>ب</u> ښ
	1200	N. Federal Hwy Suite 200	
		Address	
	В	oca Raton, FL 33432	
		City/State and Zip Code	140.00
	lch	ua@sleekmedspa.com	
For further information	E-mail address: (concerning this matter, please of	to be used for future annual report notificall:	cation)
	drew Rudnick		400-7500
	of Person	at (<u>561)</u> Area Code & Daytime	<u> </u>
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
МАП	# LING ADDRESS:	STREET/COURI	FR ANNRESS:
MAILING ADDRESS: Registration Section		Registration Section	n
Division of Corporations P.O. Box 6327		Division of Corpora Clifton Building	
Tallahassee, FL 32314		2661 Executive Cer Tallahassee, FL 323	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

				9,00	
Cosmetic Surgery Management LLC					
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)					
V.		,,,,,,,,			
The Articles of Organization for this Limited Lia	ibility Company	were filed on	12/27/2011	and assigned ?	
Florida document number L11000144				7 9	
				ري ا	
This amendment is submitted to amend the follo	wing:			and assigned and assigned	
A. If amending name, enter the new name of	the limited liab	oility company he	re:		
, <u> </u>			_		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applica	ble:	1200 N. Federal Hwy Suite 200			
(Principal office address MUST BE A STREET	(ADDRESS)	Boca Raton, FL 33432			
Enter new mailing address, if applicable:		1200 N. Fede	eral Hwy Suite 200)	
(Mailing address MAY BE A POST OFFICE BOX)		Boca Raton, FL 33432			
					
B. If amending the registered agent and/o	r registered of	ffice address on	our records, enter t	he name of the new	
registered agent and/or the new registered off	ice address her	<u>·e</u> :			
Name of New Registered Agent:					
New Registered Office Address:	1200 N. Fed	deral Hwy Suite	200		
New Registered Office Address.			ter Florida street add	ress	
	-	oca Raton	53.	33432	
		City	, Florida	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>	Address	Type of Action
MGRM	Rudnick, Ronald	768 Main St Chatham, MA 02673	Add Remove
			Add Remove
			Add Remove
			Add Remove
	_		Add Remove
			Add Remove
D. If an	mending any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)	
	Percentage of Ownership:		-
	Rudnick, Ronald 51%		_
	Rudnick, Andrew 49%		_
5 1	August 31	2012	_
Dated _	August 31		
	Signature	of a member or authorized representative of a member	
		Rudnick, Andrew Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00