

L12000055483

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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

A. LUNT

JUN 29 2011

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EXAMINER



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 JUN 25 AM 8:26

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June 15, 2012

Divisions of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314  
USA

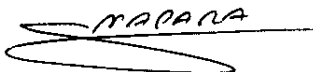
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

To whom it may concern,

This is in regards to our two new officers Dr. Aman Datta and Dr. C. Roberto Palma who we wish to add to MYLooks Florida LLC. Enclosed please find the articles of amendment with their information. Also, please note that Frederic Vimeux is being removed as one of the Manager's.

If you have any questions, please do not hesitate to call me at 604-689-0055. Thank you.

Yours sincerely,



Samira Mapara  
1010-1177 West Hastings Street  
Vancouver, BC  
V6E 2K3



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 20, 2012

DR. C ROBERTO PALMA  
910 NE 26 AVE.  
FORT LAUDERDALE, FL 33304

SUBJECT: MYLOOKS FLORIDA LLC  
Ref. Number: L12000055483

2012 JUN 25 PM 8:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

We have received your document for MYLOOKS FLORIDA LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are adding managers or members they must be listed in the correct section on page 2 of 2.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 512A00017141

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MYLOOKS FLORIDA 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:

DR. C. ROBERTO PALMA  
Name of Person

MYLOOKS FLORIDA LLC  
Firm/Company

910 NE 26<sup>th</sup> AVENUE  
Address

FORT LAUDERDALE, FL 33304  
City/State and Zip Code

frederic@cedarsonline.com • samira@cedarsonline.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FREDERIC VIMEUX at (604) 689-0055 EXT. 106  
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

2012 JUN 25 AM 8:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

MYLOOKS FLORIDA 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 04/24/2012 and assigned Florida document number L12000055483.

This amendment is submitted to amend the following:

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

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>
MGR	Frederic Vimoux	1260 Hardwood Street, #609 Vancouver, BC V6E 1S4 Canada	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Navraj Dosanjh	3024 East 15th Avenue Vancouver, BC V5M 2K9 Canada	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Dr. Aman Datta	15 Rand Drive West Orange, NJ 07052	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Dr. C. Roberto Palma	801 NE 26th Avenue Fort Lauderdale, FL 33304	<input checked="" 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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated June 28, 2012

  
Signature of a member or authorized representative of a member

Frederic Vimoux

Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 JUN 25 AM 8:26

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