

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Fax Number

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LESLY'S SALON & SPA, LLC

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K. SALY EXAMINER JUL 3 1 2012

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Corporate Filing Menu

Help

COVER LETTER

Division of Corporations		
SUBJECT: LESLY'S SALON & SPA, LLC		
	d Liability Company)	
The enclosed Articles of Amendment and fee(s) are subm	itted for filing.	
Please return all correspondence concerning this matter to	the following:	
Barbara Dang	(Nume of Person)	
l		
Legalzoom.com, Inc.	(Firm/Company)	
400 M. December Cuit	100	
100 W. Broadway Suit	(Address)	
a. a. a. a. a.		
Glendale, CA 91210	City/State and Zip Code)	
For further information concerning this matter, please cal-	! :	
Barbara Dang	at (323 _) 962-8600	
(Name of Person)	(Area Code & Daytime Telephone Numbe	π)
•		
Enclosed is a check for the following amount:	_	
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &
	(activity)	ar copy is envioued;
MAILING ADDRESS:	STREET/COURIER ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
DIVIDION OF CORPORATIONS	Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED'

12 JUL 30 AM 9: 00

SEURETARY OF STATE
FALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LESLY'S SALON & SPA, L	LC				
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)					
(A Profice Citating Company)					
The Articles of Organization for this Limited L	iability Company were filed on 06/18/2012 and assigned				
Florida document number <u>L12000080122</u>	·				
This amendment is submitted to amend the following	owing:				
	,				
A. If amending name, enter the new name of the limited liability company here:					
Lalves Oslan 9 Osa II O					
La Luna Salon & Spa, LLC The new name must be distinguishable and end wi	th the words "Limited Liability Company," the designation "LLC" or the abbreviation				
"L.L.C."	and the same and t				
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 of	Mcc address here:				
	2. or Horn				
Name of New Registered Agent:					
New Registered Office Address:	74 Cache Cay Dr.				
	(Enter Florida street address)				
	1010 Seach Borida 32943				
	(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

Title Name Address Type of Action

Add Remove

			Add Remove
*****			Add Remove
and the second second			Add
			Add
All the second s			Add Remove
D. If amer	ding any other information, enter change(s	here: (Attach additional sheets, if necessary.)	_
			
-	7/18/2012		-
Dated	Piper	authorized representative of a member	
	Piper Hom. Member	printed name of signee	

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Filing Fee: \$25.00