

L13000018777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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JANUARY 15, 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ANTHONY LOREN SKINCARE, 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:

Karla A. Ravenel

Name of Person

Anthony Loren Skincare, LLC

Firm/Company

3820 Gunn Highway, unit 101, Box A

Address

Tampa, FL 33618

City/State and Zip Code

karlaravenel@gmail.com

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

For further information concerning this matter, please call:

Karla A. Ravenel

Name of Person

813 814-2001

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

ANTHONY LOREN SKINCARE, 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 February 6, 2013 and assigned
Florida document number L13000018777.

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)

3820 Gunn Highway, unit 101, box A
Tampa, FL 33618

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

3820 Gunn Highway, unit 101, box A
Tampa, FL 33618

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:

Karla A. Ravenel

New Registered Office Address:

3820 Gunn Highway, unit 101, box A

Enter Florida street address

Tampa

City

Florida

33618

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.

Karla A. Ravenel
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

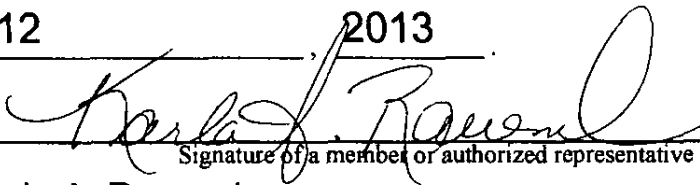
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Karla A. Ravenel	3820 Gunn Highway	<input checked="" type="checkbox"/> Add
		unit 101, box A	<input type="checkbox"/> Remove
		Tampa, FL 33616	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input 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.)*

Please update and change address of managing members Ari Peralta and Anthony

L. Yarand to the following: 3820 Gunn Highway, unit 101, Box A, Tampa, FL 33618

Dated April 12, 2013



Signature of a member or authorized representative of a member

Karla A. Ravenel

Typed or printed name of signee

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Filing Fee: \$25.00