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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Body Shop Medispa LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Greg Blair

Name of Person

G4 Consulting PA

Firm/Company

PO Box 550633

Address

Davie, FL 33355

City/State and Zip Code

greg@g4consultingpa.com

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

For further information concerning this matter, please call:

Greg Blair

Name of Person

at (954) 829-3536

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
The Body Shop Medispa LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

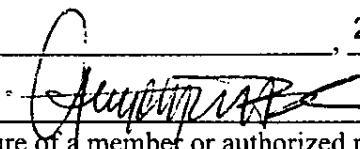
Article V - The name of the managing member "MGRM" is misspelled Susan
Byeys and is incorrect on the original filing. The name is incorrectly spelled due
to a typographical error. The correct spelling of the managing member "MGRM"
is Susan Byers.

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: May 9, 2013


Signature of a member or authorized representative of a member

Greg Blair, Registered Agent and Power of Attorney

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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13 MAY 13 PM 5:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA