## 3000132826

(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	<del>=</del> #)		
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## **COVER LETTER**

BIVE	sion of Cor	porations				
	Gulf Shore	Spa, LLC				
SUBJECT:		Name of Limited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Joseph Brown				
			Name of Person			
		Blount Law, PL				
			Firm/Company	<del></del>		
809 Walkerbilt Road, Ste 6						
			<del></del>			
		Naples, FL 34110		2016 TALL	-77	
		jbrown@blountlaw.com	City/State and Zip Code	AHAS	,	
			to be used for future annual report notification	9 P		
For further in	formation c	oncerning this matter, please ca	all:	100 F		
Joseph Brow	n		239 592-4815 at ( )	200 <b>- 8</b>		
	Name o	f Person	Area Code Daytime Telepl	hone Number	_	
Enclosed is a	check for ti	he following amount:				
■ \$25.00 F		□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fe	ee,	
		Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
				.,		

**MAILING ADDRESS:** 

TO:

**Registration Section** 

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

## TO ARTICLES OF ORGANIZATION OF

Gulf Shore Spa, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 09/09/2013 and assigned
Florida document number L13000132826	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	-
Enter new principal offices address, if applicable:	13401 Summer In Rd Ste #4
(Principal office address MUST BE A STREET ADDRESS)	13401 Summerlin Fd Ste #4 Fort Myers, FL 33919
Enter new mailing address, if applicable:	13401 Summerlin Rd Ste #4 Fort Myers, FL 33919
(Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, FL 33919
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	Mice address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	City Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>₽</u>

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 605, 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

## or removed from our records: MGR = Manager AMBR = Authorized Member **Title** <u>Address</u> Type of Action <u>Name</u> Eric Jenkins 933 Bentley Park Circle MGR ■ Add O'Fallon, MO 63368 □ Remove \_□ Change Cynthia Graf 8231 Parkstone, #105 MGR DbA 🗆 Naples, FL 34120 Remove ☐ Change □ Add ☐ Remove ☐ Change 2016 Remove 42 Change $\infty$ ☐ Remove ☐ Change ☐ Remove ☐ Change

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E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis document's effective date on the Department of State's records.	5.0207 (3)(b) ted as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl (b) The 90th day after the record is filed.	ier of:
Dated August 1  Signature of a member or authorized representative of a member	
Manager ERIL & JENKIN S  Typed or printed name of signee	

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Filing Fee: \$25.00