

L150000 47892

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
2019 FEB 21 A 11:59
ST. CLAIR COUNTY
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Addition of Mgr/Member to 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:

Dania Ajloni
Name of Person

Nora Pearson Natural Beauty Products/Pharmitek LLC
Firm/Company Services

6350 Palm Trace Landings Dr. #308
Address

Davie, FL 33314
City/State and Zip Code

nora.pearson.products@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dania Ajloni at (904) 347-5000
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

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

FILED

PharmTek Services, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

2015 FEB 21 A 11: 39

The Articles of Organization for this Limited Liability Company were filed on April 02, 2015 and assigned
Florida document number 450000047892

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 contain 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)

6350 Palm Trace Landings Dr. #308
Davie, FL 33314

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6350 Palm Trace Landings Dr
#308
Davie, FL 33314

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:

6350 Palm Trace Landings Pr. #308
Enter Florida street address.
Davie, Florida 33314
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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being add or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dania Ajlani	6350 Palm Trace Landings Dr.	<input checked="" type="checkbox"/> Add
		#308	<input type="checkbox"/> Remove
		Danie, FL 33314	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Only adding Dania Ayloni to the current LLC with all and equal rights or authority

Only changing address to 6350 Palm Trace Landings Dr. #308, Davie, FL 33314

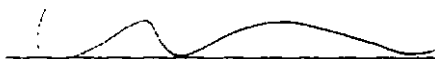
E. Effective date, if other than the date of filing: ASAP preferably 12/13/18 (optional)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated DECEMBER 13, 2018.



Signature of a member or authorized representative of a member

NORA PEARSON

Typed or printed name of signee