L15000079959

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	ry/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
. (Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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JAN TO PAT ARRIS

COVER LETTER

	Registration Section Division of Corporatio	ons		
CIID IEC	Radiant You - We	eilness, LLC		
SUBJEC	T:	Name of Lim	ited Liability Company	
The enclo	osed Articles of Amend	ment and fee(s) are sub-	mitted for filing.	
Please ret	turn all correspondence	concerning this matter	to the following:	
	Mic	chele A. Mysnyk-DeAn	gelo	
			Name of Person	
			Firm/Company	<u> </u>
	509	SE 13th Ave.		
			Address	
	Dee	erfield Beach, FL 3344	I	
			City/State and Zip Code	
	mad <u>ı</u>	oac.skin@gmail.com	o be used for future annual report notifi	cation)
For further	er information concerni		-	ounter)
Michele .	A. Mysnyk-DeAngelo		561 716-9109	
	Name of Person		at (Telephone Number
Enclosed	is a check for the follow	ning amount.		
	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 AI Registration Se Division of Co P.O. Box 6327	ection rporations	STREET/COURTE Dehistration Section Division of Corpora Clinor Building	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document numberL15000079959 This amendment is submitted to amend the following:	 l assig	ned
Florida document number This amendment is submitted to amend the following:	l assig	ned
his amendment is submitted to amend the following:		
<u> </u>		
. If amending name, enter the new name of the limited liability company here:		
adiant You, LLC		
ne new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation	"L.L.	C."
nter new principal offices address, if applicable: 509 SE 13th Ave		
Principal office address MUST BE A STREET ADDRESS) Deerfield Beach, FL 33441	7	
	234 282	m.f.
	-9	-,35
nter new mailing address, if applicable:	<u> </u>	3.5
Sailing address MAY BE A POST OFFICE BOX)		·
	2 8	<u>.</u> :

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A	 	Add
			□ Remove
	N/A		Add
			☐ Remove
			□ Change
	N/A		Add
			□ Remove
			☐ Change
	N/A		□ Add
			☐ Remove
			☐ Change
	N/A		□ A₩
			□ Remove
			□ Change
	N/A		—————————————————————————————————————
			□ Remove
			☐ Change

	<u> </u>
ective date, if other than the date of filing:	will not be liste
he 90th day after the record is filed.	
ed January 4 , 2017	
~ [[\mathred M \math	
Signature of a member of authorized representative of a member	17 J
Signature of a member or authorized representative of a member Michele A. Mysnyk-DeAngelo	17 JAN -

Filing Fee: \$25.00