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## **COVER LETTER**

TO: Registration.S	ection			; .
Division of Co.	rporations	••	· •	•
INFINITY	SPA ORLANDO, LLC			:
SUBJECT:	Name of Limit	ed Liability Company		
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.		: .
Please return all correspo	ondence concerning this matter to	o tho following:		:
	Sarah Gulait, Esq.		; ;	
	<del></del>	Name of Person		
	GULATT LAW, P.L.			:
		Firm/Company		
	479 Montgomery Place			
	· · · · · · · · · · · · · · · · · · ·	Address	And the second s	1
	Altamonte Springs, FL. 327	14.		
And the second s	* ************************************	City/State and Zip Code		
The second of th	Office@gulatilaw.com	be used for future annual report notifi		<u>.</u>
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1 or further information c	oncerning this matter, please;call	l; · · · ·		
Sarah Gulati, Esq.	. •	407 900-5054 at (		
Name o	f Person	Arez Code Daytime	Telephone Number	· !
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· · · · · · · · · · · · · · · · · · ·		(additional copy is enclosed)	Certified Copy (additional copy is enclosed	d)

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

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 "LLC".  Enter new principal offices address, if applicable:  Description office address MUST BE A STREET ADDRESS!  Conter new mailing address, MUST BE A STREET ADDRESS!  Conter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX!  If amending the registered agent and/or registered office address on our records, enter the name of the expectation of New Registered Agent:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida - Zip Code  item Registered Agent: the appointment as registered agent and agree to act in this capacity. I further agree to copy by the intervisions of all statutes relative to the proper and complete performance of my duties, and I am jamility with address the obligations of my position as registered agent and complete performance of my duties, and I am jamility with address the obligations of my position as registered agent appropriate in the registered of the obligations of my position as registered agent as provided for in Chapte 605, F.S. Or, If the Holecumpy is early filed to merely reflect a change in the registered office address. I hereby confirm that the limited itability is seen filed to merely reflect a change in the registered office address. I hereby confirm that the limited itability is a series of the manual provided for in Chapte 605, F.S. Or, If the fifteen were the office address. I hereby confirm that the limited itability is a series of the manual provided for in Chapte 605.	In that I by Orivino 'tro		
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B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:    Name of New Registered Agent:   New Registered Office Address:   Enter Florida street address	The Articles of Organization for this Limited Liability Company	y were filed on 10/07/2015	end sssigned
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Page 1 of 3	Page :	1 of 3	

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		Orlando, FL, 32806	☐ Remove	٠.
٠.,•			□ Change	
MGR-	SHERRY PADILLA GALLARDY	520 Avalon Blyd.	<b>⊟</b> Add	
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E. Effective date, if other than the date of filling:  (If an effective date is listed, the date must be specific and cannot be prior to date of filling or more than 90 days after filing.) Problem to Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	605.0207	636)
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Dated		
Signature of a member or authorized representative of a member	:	
Typed or printed name of signee	:	
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