

L16000062813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

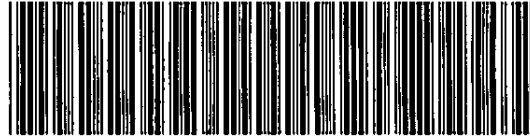
(Business Entity Name)

(Document Number)

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APR 12 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 24, 2016

MARK FAROUDI  
2203 N LOIS AVE 814  
TAMPA, FL 33807

SUBJECT: BELLADIOR LLC  
Ref. Number: L15000187584

Please See other Pages  
the correction is in reference to  
"BELLALUXE NEUTRA LLC" not  
"Belladior LLC"

We have received your document for BELLADIOR LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 116A00006130

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

RECEIVED  
2016 APR -5 AM 11:56  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bellaluxe Neutra 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:

RAYMOND FAROUDI  
Name of Person

Bellaluxe Neutra LLC  
Firm/Company

2203 N Lois Ave 814  
Address

Tampa, FL 33607  
City/State and Zip Code

RMF.Corp@Verizon.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAYMOND FAROUDI at (941) 735 9843  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

BellaLuxe Neutra LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/4/2015 and assigned  
Florida document number L1600062813

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 office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1532 US Highway 41 BYP #145  
Venice FL 34293

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME

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:

RAYMOND FAROUD

New Registered Office Address:

1532 US Highway 41 BYP #145

(Enter Florida street address)

Venice

City

Florida

34293-1032

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



\* Attn: Ms. YASEMIN \*

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

Please add Jonathan Dean as 100% owner of this LLC and Raymond Farouki as the sole (only) manager.

16 APR 5 11 23 AM '63

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (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.

(b) The 90th day after the record is filed.

**Dated** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

RAYMOND FAROUN

Typed or printed name of signee