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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Health and Baauty LLC Name of Limited Liability Compan)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sandra E. Ronquillo Name of Person
Name of Person
Hoalth and Beauty LLC
- m. output,
7904 Sonoma Springs Ci/ Apt. 108
Late Worth FL. 33463 City/State and Zip Code
gohan 1 thand beauty 2016 (2 mail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sandra Ronquillo at (561, 6700105 Name of Person Area Code Daytime Telephone Number
Name of Ferson Area Code Dayline Ferephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate of Status & Certificate o

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

-	City	, Florida Zip Code	
	Enter Florida st		
New Registered Office Address:			
Name of New Registered Agent:			
The state of the s			
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the	<u>1e nev</u>
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A CONTRACT OFFICE WHITE OF TAXABLE BE TO STRUCT	are or a sample!	Fr. 0)	
Principal office address MUST BE A STREET		mand	
Enter new principal offices address, if applicabl	le:		
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."	
s. It amending name, <u>enter the new hathe of th</u>	е иниси вхоциу соптрану цеге:		
A. If amending name, enter the new name of th			
This amendment is submitted to amend the following	ing:		
Florida document number L16 000 1135 o	98		
The Articles of Organization for this Limited Liabi		13/2016 and assigned	i t
·	Liability Company as it now appears on a Florida Limited Liability Company)		
•	I	our records.)	
LIGUIN AND	Beauty LLC		

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

Title	Name	Address	Type of Action
AMBR	Wilfrado A. Ronquillo	7904 Sonoma Springs Cir Apt. Lake worth Fl. 33463	IO8 ⊠ Add
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			Change
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record specifies a delayed ef he 90th day after the record	fective date, l	but not an eff	ective time, a	t 12:01 a.m	. on the	e earlic
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Page 3 of 3

Filing Fee: \$25.00