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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificate | s of Status |
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COVER LETTER

| TO: Registration S Division of Co | | | |
|-----------------------------------|---|---|--|
| SUBJECT: OA | ICE TEMPS Name of Lin | LLC nited Liability Company | |
| The enclosed Articles of | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | | Name of Person | |
| | Space Co | ast Aesthe | etics |
| | 1108 June | Address | |
| | Melboury | City/State and Zip Code | 569mail.com |
| | SPACECOC E-mail address: (| 15 tales the 10 | <u>569ama(1. Com</u> |
| For further information of | concerning this matter, please c | | |
| Daya NIC Name o | 01 - Hill of Person | at (321) 506 Area Code Daytim | -7157 e Telephone Number |
| Enclosed is a check for t | he 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 Tailahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Office Temp | S LLC | · | | | _ | |
|--|--|---|------------------------|--------------|---|-------------|
| (Name of the Limite | d Liability Comps A Florida Limited | any as it now appears Liability Company) | on our records.) | | | |
| The Articles of Organization for this Limited Lia Florida document number LIBOO 11 | bility Company | were filed on <u>O</u> | <u> </u> | <u>6</u> and | i assign | ed |
| This amendment is submitted to amend the follow | wing: | | | | | |
| A. If amending name, enter the new name of Space Coast Aes | thetic | is LLC | | | | |
| The new name must be distinguishable and contain the wo | rds "Limited Liabi | • • • | - | | | |
| Enter new principal offices address, if applica | 11011 | | ce_ | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | Melbourne, FL 32940 | | | | |
| Enter new mailing address, if applicable: | | N/A | | | | |
| (Mailing address MAY BE A POST OFFICE B | <u>:(OX)</u> | | | 7 | <u> </u> | .193895 * 1 |
| B. If amending the registered agent and/o registered agent and/or the new registered off | _ | | our records, <u>en</u> | ter the na | mie ² of | the new |
| Name of New Registered Agent: | N/A | | | | <u> </u> | |
| New Registered Office Address: | | Enter Florid | la street address | | | |
| | , Florida | | | | | |
| | · | City | , i ioiida | Zip C | ode | |

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> Name **Address Type of Action** □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add Remove ___ Change □ Add □ Remove ☐ Change □ Add _□ Remove ☐ Change ☐ Remove

☐ Change

| . N/A | | | | | · · |
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| fective date, if other than the date of filing: | ior to date of t licable statu | tory filing requ | iirements, this | filing.) Pursuar | nt to 60 be lis |
| cument's effective date on the Department of State's record | ds. | | | | |
| record specifies a delayed effective date, but r The 90th day after the record is filed. | not an eff | ective time, | at 12:01 a | .m. on the | earl |
| $\frac{04/18/2017}{.}$ | · | | | | |
| , | | 7 | | | |
| Dansa Sulul - 7. Signature of a member or au | thorized repr | resentative of a n | nember | | |

Page 3 of 3

Filing Fee: \$25.00