

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L16000108652

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PAGIO'S & ASSOCIATES, LLC
Account Number : I20100000043
Phone : (305)397-8553
Fax Number : (305)397-8521

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jennmendoza@aol.com

2022 MAR 11 PM 3:07

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 GLO BAR- ORGANIC FACIALS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2022 MAR 11 PM 4:02
 DIVISION OF STATE
 CORPORATIONS
 FILED

APPROVED
 AND
 FILED

COVER LETTER

H22000093193 3

TO: Registration Section
Division of Corporations

SUBJECT: GLO BAR- ORGANIC FACIALS 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:

YECENIA JENNY MENDOZA

Name of Person

GLO BAR- ORGANIC FACIALS LLC

Firm/Company

7000 SW 62ND AVE, PH-D

Address

MIAMI, FL 33143

City/State and Zip Code

JENNMENDOZA@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YECENIA J. MENDOZA

818

220-3432

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

H22000093193 3

GLO BAR- ORGANIC FACIALS 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 09/09/2016 and assigned
Florida document number L16000168652.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SKINCARE818 BY JENNY, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7000 SW 62ND AVE, PH-D

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33143

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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

APPROVED
AND
FILED
2022 MAR 11 PM 4:02

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H220000931955

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change
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		<hr/>	<input type="checkbox"/> Remove
		<hr/>	<input type="checkbox"/> Change

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

[illegible]

F. Effective date, if other than the date of filing: MARCH 11, 2022 (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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated MARCH 11, 2022

Signature of _____

Signature of a member or authorized representative of a member

YECENIA JENNY MENDOZA

Typed or printed name of signee

Filing Fee: \$25.00