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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HISPANUSA INC Account Number : I20070000099 : (954)478-2706 Phone : (954)934-0334 Fax Number

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

Email Address:

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EMCRAFTS LLC

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COVER LETTER

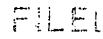
TO: Registration Se Division of Cor			
EMCRAF	TS LLC		
SUBJECT:	Name of Limi	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
	ndence concerning this matter t		
	FERN	ANDO MEDINA SANCHEZ	
		Name of Person	_
		MG	
		Firm/Company	
	C/O 8	050 N UNIVERSITY DR SUITE 2	06
Address		Address	
		TAMARAC, FL 33321	
		City/State and Zip Code	
		INFO@HISPANUSA.COM o be used for future annual report notif	ication)
T. E. Marinformation of			1-94011
	concerning this matter, please or		
FERNANDO MEDENA		at ()	e Telephone Number
Name o	f Person	Area Code Daytime	E Telephotie i valuoer
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	ING ADDRESS:	STREET/COURI	
Divisi	ration Section on of Corporations	Registration Section Division of Corpor	
	30x 6327	Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	EMCRAFTS LLC	2019 OCT 16 P
(Name of the Limited I	Liability Company as it now appears on our reflorida Limited Liability Company)	ecords,)
(A.S.	Florida Limited Liability Company)	IATH AHABSEE, HI
The Articles of Organization for this Limited Liabi	lity Company were filed on 10/06/2016	and assig
Florida document number L16000185782	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
AVANCES PARA LA ESTETICA LLC		
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		souds autor the name o
B. If amending the registered agent and/or registered agent and/or the new registered office	registered omce address on our re e address here:	cords, enter the name o
Name of New Registered Agent:		
Name Descriptions of Office Address		•
New Registered Office Address:	Enter Florida street	address
		, Florida
•	City	Zip Code
New Registered Agent's Signature, if changing Reg	istered Agent:	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complete provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docubeing 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 bei or removed from our records:

MCK =	Manager
AMBR =	Authorized Member

<u>Títle</u>	<u>Name</u>	Address	Type of A
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(If an effective Note: If th	late, if other than the date of filing:
If the record (b) The 90t	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied high day after the record is filed.
Dated	0 - Lober 6, 2019.
	FERNANDO MEDINA SANCHEZ
-	Typed or printed name of signee

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Filing Fee: \$25.00