## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H170003224743)))



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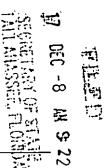
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNNY DAY SPA OF PANAMA CITY LLC

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



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION H17000322474 3 OF

		ANAMA CITY LLC	
( <u>Napre of the Liquited</u> (A	Liability Company Florida Limited Lia	Bill the appears on our records.)  bility Company)	
The Articles of Organization for this Limited Liab Florida document number L16000209033	oility Company w	ere filed on NOVEMBER 15, 201	6and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, onter the new name of t	he limited liabili	ty company here:	
INTERNATIONAL CARGER CONNECTION L			
The new name must be distinguishable and contain the wor	ds "Limited Liability	Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:	2201 DOROTHY AVENUE	
(Principal office address MUST BE A STREET		PANAMA CITY BEACH, FLORI	DA 32408
		0001 BOBO((())/ 44/5)/UB	
Enter new mailing address, if applicable:		2201 DOROTHY AVENUE	D4 20 10 1
(Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>	PANAMA CITY BEACH, FLORI	DA 32408
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:			r the name of the new
New Registered Office Address:	2201 DOROT	HY AVENUE	- E
	Enter Florida street address		into the
	PANAMA CI	TY BEACH, Florida_	3240824
		Ciry	Zip Edde
New Registered Agent's Signature, if changing Re-	gistered Agent:		
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the region company has been notified in writing of this change in the change in	and complete pared agent as progested agent as progested office as	erformance of my duties, and I am ovided for in Chapter 605, F.S. O ddress, I hereby confirm that the l	familiar with and r, if this document is imited liability

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

H17000322474 3

## MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	NGOC MY NGUYEN	2201 DOROTHY AVENUE	
		PANAMA CITY BEACH, FI.	□ Remove
		32408	_₽ Change
MGR	UYEN ALNGOC DINH	2201 DOROTHY AVENUE	
		PANAMA CITY BEACH, FL	☐ Remove
		32408	☐ Change
MGR	HUY NGUYEN	2201 DOROTHY AVENUE	Add
		PANAMA CITY BEACH, FI.	
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