

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone #	,
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
	Office Use Only	



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09/10/17--01008--008 **25.00



D. SCOTT AUG 1 1 2017

COVER LETTER

SUBJECT: Ko	: Beauty	LLC		
	Name of Lin	nited Liability Company		
The enclosed Articles of Ar	nendment and fee(s) are sul-	omitted for filing		
		•		
Please return all correspond	ence concerning this matter	to the following:		
	Car	Iton Brankes	Σ	
		Name of Person		
		Firm/Company		
	2114			
	dill N.	Hamingo Road	Suite Ze	2
		Address		
	Pembroke	Address Pines FL City/State and Zip Code Q gmail. Combo be used for future annual report noti	33028	
		City/State and Zip Code	 	ب <u>م</u> يد
	<u>CDranker</u>	@gmail. Com	1	SECONOMIC TO THE PROPERTY OF T
	E-mail address: (to be used for future annual report noti-	fication)	題書工
For further information cone	erning this matter, please ca	ıll:		爾吉馬
Carlton To	Branker	at (<u>75 /</u>) <u>206</u> Area Code Daytime	- 2934	FILED M 2.1
Name of Pe	rson	Area Code Daytime	Telephone Number	7 5 5 5
Enclosed is a check for the fo	ollowing amount:			77. C
\$25.00 Filing Fee		□ \$55.00 Filing Fee &	🗖 ጵፈላ ስለ ተመ 👵	1200
	Certificate of Status	Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate of Certified Co (additional cop	of Status & Py

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

ability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on April 18, 20(7) and assigned Florida document number <u>417000086514</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new egistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

lew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and eccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

f 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>l'itle</u>	<u>Name</u>	Address	Type of Action
MBR	He, xiaoli	No. 16 Hong DA	
		No. 16 Hone DA Industrial Area	🗆 Remove
		Beijng Daxing District	Change
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I	he title of the Xindi
	shall be changed from
	Manager - 010 title
	to
,	Authorized Member - New Title
	TOTALLE TOWN IT IT
	
ctive (date, if other than the date of filing: 40505+ 4, 2017 (optional)
<u>.</u>	re date is listed, the date must be specific and cannot be proof to date of filing or more than 90 days after filing.) Pursuant to 605.02 ne date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.
ment	s effective date on the Department of State's records.
ecord	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
e 901	th day after the record is filed.
d	August 4, 2017.
<u> </u>	
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00