

L17000107835

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : GLOBAL ONE ACCOUNTING LLC
Account Number : 120180000044
Phone : (407)929-1519
Fax Number : (407)366-8080

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LUX TOTAL BEAUTY LLC

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUX TOTAL BEAUTY 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 05/15/2017 and assigned
Florida document number L17000107835.

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal office 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)

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:

CHEMIN, OLIVIER DOMINIQUE

New Registered Office Address:

9001 TABORFIELD AVE STE 101

Enter Florida street address

ORLANDO

Florida

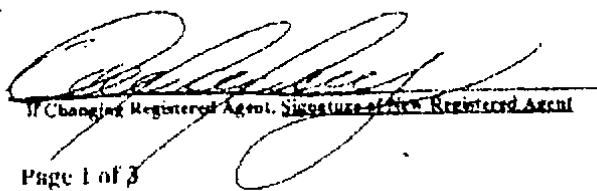
32816

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

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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

Title	Name	Address	Type of Action
MGR	SILVA, MAURICIO JOSE	9001 TABORFIELD AVE STE 101 ORLANDO, FL 32836	☐ Add ☒ Remove
			☐ Change
MGR	SILVA, FERNANDA PIRES	9001 TABORFIELD AVE STE 101 ORLANDO, FL 32836	☐ Add ☒ Remove
			☐ Change
MGR	GWP AMERICAN BEAUTY LLC	7065 WESTPOINTE BLVD STE 102 ORLANDO, FL 32835	☒ Add ☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

19 SEP 17 PM 3:22

FILED

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

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19 SEP 17 PM 3:30
FBI - NEW YORK

E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (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 605.02(f), (3)(b) of the Rules of the Commission, this date will not be listed as the effective date of the filing.

Note: If the date entered 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.

12/12/20

September 16th 1919

Signature of a member or authorized representative of a member

Alfred D. G. Brown
(Printed or printed name of source)

Typed or printed name of signer

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