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## **COVER LETTER**

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TO:

Registration Section Division of Corporations

CUDIECT.	PRETTY ON YOU I	LC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	MARI	A A. CHIRINOS CALDERON	
	<del></del>	Name of Person	<del></del>
	PRET	TY ON YOU LLC	
		Firm/Company	
	660 YOUNGSTOWN PK	WY APT 283	
	_	Address	
	ALTAMONTE SPRINGS	, FL 32714	
		City/State and Zip Code	<del></del> -
	E-mail address: (	to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
MARIA A. CHIRINO	S CALDERON	347 272-5653	
Name	of Person	at () Area Code Daytin	ne 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)
Regi: Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

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

PRETTY ON YOU LL	.C	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	<del></del>
	y were filed on <u>07/25/2017</u>	and assigned
Florida document number		
rida document numberL17000159061  s amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  er new principal offices address, if applicable:		
A. If amending name, <u>enter the new name of the limited lial</u>	document numberL17000159061  endment is submitted to amend the following:  mending name, enter the new name of the limited liability company here:  name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"  ew principal offices address, if applicable:  pul office address MUST BE A STREET ADDRESS)  ew mailing address, if applicable:  graddress MAY BE A POST OFFICE BOX)  amending the registered agent and/or registered office address on our records, enter the name of the new red agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Florida	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" o	r 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 applicables		27
• •		111
Maning duaress MAT BE A POST OFFICE BOAT		
	*- <del></del>	<u> </u>
R. If amanding the registered egent and/or registered	office address on our records	enter the name of the new
		enter the name of the new
	_	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	rrt it	_
	Enter Florida street address	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	AREVALO, ANA GABRIELA	660 YOUNGSTOWN PKWY APT 283	
		ALTAMONTE SPRINGS, FL 32714	■ Remove
			Change
MGRM	MARIA A CHIRINOS CALDERON	350 W 42 ST APT 4L	<b>=</b> Add
		MANHATTAN, NY 10036	☐ Remove
			☐ Change
AMBR	EDUARDO AREVALO	SECTOR LA PEDREGOSA URB PUERTAS DEL SOL 57	
		MERIDA, VZ 5101 VZ	■ Remove
		<del></del>	☐ Change
			☐ Remove
			Change
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ective date, if other than the offective date is listed, the date must te: If the date inserted in this blocument's effective date on the De	be specific and cannot be prio ck does not meet the appli	cable statutory filing req		
record specifies a delayed he 90th day after the reco	effective date, but no ord is filed.	ot an effective time	, at 12:01 a.m. on the $\epsilon$	earlier o
DECEMBER 07	2018			

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Typed or printed name of signee

Filing Fee: \$25.00