

L17000196543

KRISTEN MIDDLETON

(Requestor's Name)

~~8516 Turkey Oaks Lane~~

(Address)

8516 TURKEY OAKS LN  
DRIVE S. 32277 J2x, FL

(Address)

J2x, FL

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

SKINTIQUE LLC

(Business Entity Name)

L17000196543

(Document Number)

Certified Copies X

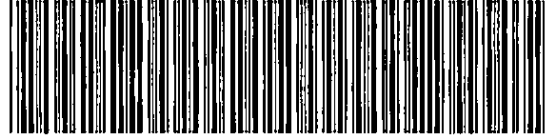
Certificates of Status X

Special Instructions to Filing Officer:

changing name  
from Foxxylady's  
LLC TO SKINTIQUE  
LLC

wrong form

Office Use Only



200312093882

04/25/18--01008--007 \*\*52.50

X

06/12/18--01006--001 \*\*7.50

FILED

18 JUN 28 PM 12:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 13, 2018

KRISTEN MIDDLETON  
8516 TURKEY OAKS LN DS  
JACKSONVILLE, FL 32277

SUBJECT: FOXXYLADY'S LLC  
Ref. Number: L17000196543

We have received your document for FOXXYLADY'S LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist III

Letter Number: 218A00012360

60

RECEIVED  
2018 JUN 28 AM 10:15  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 27, 2018

KRISTEN MIDDLETON  
8516 TURKEY OAKS LN DS  
JACKSONVILLE, FL 32277

SUBJECT: FOXXYLADY'S LLC  
Ref. Number: L17000196543

We have received your document for FOXXYLADY'S LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$7.50.

The form you submitted is for a Corporation, but your entity is a Florida LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist III

Letter Number: 018A00008736

RECEIVED  
2018 JUN 12 PM 12:30  
DEPT OF STATE  
CORPORATIONS  
SEE FLO

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Foxxylady's LLC  
Name of Limited Liability Company  
"I want to change to SKintique LLC"

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

KRISTEN MIDDLETON  
Name of Person

FOXXYLADY'S LLC "SKintique LLC"  
Firm/Company

8516 TURKEY OAKS DRIVES.  
Address

JAX / FL / 32277  
City/State and Zip Code

mittletonkristen@rocketmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristen Middleton at 904 9940129  
Name of Person Area Code Daytime 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)

MAILING ADDRESS:  
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

Foxy Lady's 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 9/21/17 and assigned  
Florida document number L17000196543

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SKINTIQUE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

550 Balmoral  
CIRCLE N. SUITE 208  
JACKSONVILLE, FL 32210

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8516 TURKEY OAKS DRIVE  
SOUTH  
JAX, FL 32277

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:

Same registered agent

New Registered Office Address:

Enter Florida street address

Florida

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

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

FILED  
JUN 28 PM 12:03  
18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

changing name from  
Foxxylady's LLC  
to  
SKintique LLC

FILED  
18 JUN 28 PM 12:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

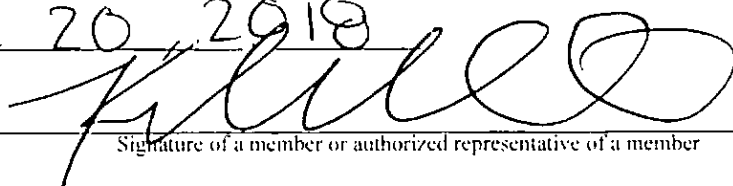
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted 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.

Dated JUNE 20, 2018

  
Signature of a member or authorized representative of a member

KRISTEN N. MIDDLETON  
Typed or printed name of signee