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COVER LETTER

то:		
SUBJE	r: God-ish skin, LLC	
	Name of Limited Liability Company	
	Tova Palomino Name of Person	
	60d-ish Skin, LLC	
	Firm/Company	And the submitted Liability Company I was a submitted for filing. I was a concerning this matter to the following: I was a concerning this matt
	9403 Pines blud. # 1022	
	Pempioke Pines, fl 33024	
Division of Corporations SUBJECT: GOd - ISh SKIN LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: TOVA PALOMINO Name of Person God-ISN SKIN, LLC Firm/Company 9403 Pines blvd. # 1022 Address Pane of Limited Liability Company God-ISN SKIN, LLC Firm/Company 9403 Pines blvd. # 1022 Address Pane of Limited Liability Company God-ISN SKIN, LLC Firm/Company 9403 Pines blvd. # 1022 Address Pane of Pines of City/State and Zip Code City/State and Zip Code City/State and Zip Code Name of Further information concerning this matter, please call: TOVA Palumino Name of Person at (954) 263-7321 Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\frac{4}{825.00}\$ Filing Fee \$\frac{1}{800.00}\$ Siting Fee \$\frac{1}{800.00}\$ Certificate of Status Certificate Copy (additional copy is enclosed) Mailling Address: Street Address:		
	E-mail address: (to be used for future annual report notification)	
For furt	r information concerning this matter, please call:	
To	Name of Person at (954) 263-7321 Area Code Daytime Telephone Number	
Enclose	is a check for the following amount:	
∮ .\$25	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy	

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2020 HAY ! | PM |: 46

(Name of the Limited Liability Company as it now appears on Our recommendate BEE. FL (Inti-

Florida document number L17000211 469	were filed on 10 11	and assigned
Florida document number 21100021100.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records,	enter the name of the new registered
Name of New 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>	Address	Type of Action
AMBR	Tova M Palomino	5758 WW 119 terrace Coral Springs, Fl 33076	□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
,			□Add
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(If an ef Note:	tive date, if other than the date of filing:
he reco ord is f	ord 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 filed.
Dated	May 514 , 2020.
	Med WILL
	Signature of a member or authorized representative of a member
	programmed of a member of authornied representative of a member