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Division of Corporations

### Florida Department of State

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(((H18000040216 3)))



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## H1800004021U3

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	Spa.	Z, LLC			
(Name of the Limited			menrs on our records.)	· · · · · · · · · · · · · · · · · · ·	
The Articles of Organization for this Limited Li Florida document number L17000214156	ability Company			and assigned	
This amendment is submitted to amend the following	wing:	;			
A. If amending name, enter the new name of	the limited liat	oility company	<u>he</u> re:		
Spa Z LLC			<del></del>		
The new name must be distinguishable and end wit "L.L.C."	h the words "Lin	iited Liability Co	ompany." the designation	"LLC" or the attraction	
Euter new principal offices address, if applica	ble:	3250 N Feder	ral Hwy	五百 五	
Principal office address MUST BE A STREET	(ADDRESS)	Boca Raton, I	Florida 33431		
		··-·			
_		1712 C ()	- D1 - 1	9. 9	
Enter new malling address, if applicable:		4713 S Occar			
(Mailing address MAY BE A POST OFFICE B	<u>10.V</u>	righand bea	ch, Florida 33487	<u> </u>	
B. If sinending the registered agent and/or registered agent and/or the new registered off  Name of New Registered Agent:	lce address her	Mice address o g: gs Incorporated	m our records, <u>enter</u>	the name of the new	
New Registered Office Address:	1200 South Pine Island Road				
Tress 12/ Soverest Order Sand 639	Enter Florida street address				
	Plantation		Florida	324	
		Cth		Zip Code	
New Registered Agent's Signoture, if changing Re	elstered Agent:				
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this company.	and complete ered agent as p gistered office hange.	performance of provided for in address, I here	f my duties, and I am f Chapter 605, F.S. Or,	amiliar with and If this document is uted Hability	
	Page 1	of 3	Marker	Silliams, AUP	
		***		Business Filings Theoporated	

MGR = Manager

To:

# 4180000402143

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = Authorized Member Title Name Address Type of Action MGR Merryl Auman 3170 N FEDERAL HWY #207 LIGHTHOUSE POINT, FL 33065 AMBR Merryl Auman 4713 S Ocean Blvd X Highland Beach, Florida 33487

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4180000402163

D. If aine	uding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
_	
_	zir.
	•
E. Effectiv	re date, if other than the date of filing:
Dar <del>e</del> d	Jeh 1, 2018
	Signature of a member or nuthorized representative of a member
	Merryl Auman, Member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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