## L17000254374

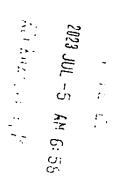
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Decomposit Number)
(Document Number)
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## ARTICLES OF AMENDMENT TO ·

ARTICLES OF ORGANIZATION **OF** 

		18. 5 KK 6: 58
Secrets Spa & Nails, LLC		ALI Alland
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.):
		17/13/7017
e Articles of Organization for this Limited I	Liability Company were filed on _	and assigned
orida document number L17000254374	<u> </u>	
is amendment is submitted to amend the fol	llowing:	
If amending name, enter the new name	of the limited liability company	<u>here</u> :
new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if appli	icable:	
rincipal office address MUST BE A STRE.	ET ADDRESS)	
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE	E BOX)	
If amending the registered agent and/or	registered office address on our	records, enter the name of the new reg
ent and/or the new registered office addre	ess here:	
	4 1 22 1 11	
Name of New Registered Agent:	Andres Trujuillo	
New Registered Office Address:	1331 Lincoln Rd	
	Enter Fi	lorida street address
	1.47 (T) 1	221.20
	Miami Beach	, Florida = 33139 Zip Code

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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR Andre	Andres Trujillo	1331 Lincoln Rd	Add
		Miami Beach, FL 33139	□Remove
			□Change
MGR	Phouvilay Tayxayavong	937 NW 97th Ave, Unit #206	□Add
		Miami, FL 33172	
		,	Change
			□Remove
			□Change
		*	□Remove
			Change
	····		□Add
			□Remove
			□Change
	· .		
			□Remove
			□Change

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
(If an effect <u>Note:</u> If	e date, if other than the date of filing: 66/38/3 (optional) ive 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 (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
ne record s ord is filed	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
Dated _	2023  All Signature of a member or authorized representative of a member
	al All
•	Signature of a member or authorized representative of a member
	Andres Trujillo, Manager
	Typed or printed name of signee

Filing Fee: \$25.00