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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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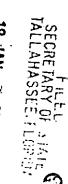
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COVER LETTER

	n Section Corporations	
SUBJECT:	American Queen Nais & SPA LLC	
· •	Name of Limited Liability Company	
	†	
The enclosed Arti	s of Amendment and fee(s) are submitted for filing.	
Please return all c	espondence concerning this matter to the following:	
	Jennie Heinandez	
	Name of Person	
	America Queen Nais & SPACCS	
	Firm/Company	
	r nitr Conpany	
	1475 LYDDS QD	
	1475 LYDAS (21)	
	(ocont. Creek fl 33063	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
	E-mail address: (to be used for future annual report notification)	
For further inform	on concerning this matter, please call:	
	- 1	
	ennie Hernander au (951) 682 8567	
	me of Person Area Code Daytime Telephone Number	
Enclosed is a chec	for the following amount:	
മ \$25.00 Filing	e S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status Copy is enclosed) Certified Copy (additional copy is enclosed)	
	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Cliffon Building	
	Hahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	

TO ARTICLES OF ORGANIZATION OF

American	Queen N	Ja ILS	4 584	A . L LC		
(Name of the Limited					·	
The Articles of Organization for this Limited Liab Florida document number	oility Company we 255,987 ving:	ere filed o	n <u>12</u> /	;	and as	signed
The new name must be distinguishable and contain the wor	ds "Limited Liability (Company,"	the designation	n "LLC" or the at	obreviation "I	"L.C."
Enter new principal offices address, if applicat	ole: _	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
(Principal office address MUST BE A STREET	<u>ADDRESS)</u>	\ 			 	Z X
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Both) B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	registered office ee address here:			· ·	AN -5 AN -5 The name	CRETARY OF SIA E THE NEW OF THE NEW
•	<u> </u>	N LIA I	Herna 37th	<u> </u>		
New Registered Office Address:		Ente	r Florida street		33C Zip Code	064
New Registered Agent's Signature, if changing Re	gistered Agent:					
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the recompany has been notified in writing of this change in the company has been notified in writing of this change in the company has been notified in writing of this change in the company has been notified in writing of this change in the company has been notified in writing of this change in the company has been notified in writing of this change in the company has been notified in writing of the company has been notified in writing the company has been notified in the comp	and complete per ered agent as pro gistered office add	rformano vide <mark>d</mark> for	e of my dut in Chapter	ies, and I am j 605, F.S. Or,	familiar wi if this doc	th and ument is
	If Changin	evoul g Register	o Ku ed Agent, <u>Sig</u> r	nature of New Re	gistered Age	nt

Page 1 of 3

MGR = Mar AMBR = Aut	nager thorized Member					
<u>Title</u>	<u>Name</u>		Address			Type of Action
MGR	Jennie	Hernandez	io II	NW 3	Beach Fl	3306Y
						Remove
						☐ Change
MOR	GerARLO	Hernandez	611 r	vw 1	37th St	Add
			Pony	Dano	Beachf	☐ Add
						☐ Change
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				(2)
				
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E. Effective date, if other than the date of fili	ing:		(optional)	
(If an effective date is listed, the date must be specific a Note: If the date inserted in this block does not	and cannot be prior to t meet the applicab	le statutory filing require	O days after filing.) Pursuant ements, this date will not l	to 605.0207 (3)(be listed as the
document's effective date on the Department of	f State's records.			
If the record specifies a delayed effective (b) The 90th day after the record is filed		an effective time, a	t 12:01 a.m. on the	earlier of:
Dated January 4th	_:2018			
Dated January 4th Gerande Signature of	Hem			
Signature of	a member or authori	zed representative of a men	nber	
Signature of Gerardo	Heman	ide/2		
	Typed or printed	name of signee		

Page 3 of 3

Filing Fee: \$25,00