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SECRETARY OF STATE TALLAHASSEE, FLORIDA

201414

COVER LETTER

Division of Co	orporations		
Aroma2B SUBJECT:	cauty LLC		
SOBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Mikhail Guseynov		
		Name of Person	
		Firm/Company	
	2800 Palmwood Terrace A	spt. P221	
		Address	
	Boca Raton FL 33431		
		City/State and Zip Code	
	general@hemilamu.com		
	E-mail address: (to be used for future annual report noti	Code Solution Sol
For further information	concerning this matter, please ca	all:	
Mikhail Guseynov			
Name	of Person	at () Area Code Daytim	e 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)	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO: Registration Section

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

Aroma2Beauty LLC					
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number L18000034714	were filed on 2/7/2018 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
MILAMU ENTERPRISES LLC					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	c/o DVM Global Services, Inc.				
Principal office address MUST BE A STREET ADDRESS)	4400 N Federal Highway Ste 210				
	Boca Raton FL 33431				
Enter new mailing address, if applicable:	e/o DVM Global Services, Inc.				
(Mailing address MAY BE A POST OFFICE BOX)	4400 N Federal Highway Ste 210				
	Boca Raton FL 33431				
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office 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
MGR	Michael Silverberg	c/o DVM Global Services, Inc.	_
		4400 N Federal Highway Ste 210	Remove
		Boca Raton FL 33431	□ Change
			□ Remove
			SECRETARY TALL AHASSET
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n effective date is lis te: If the date ins cument's effective	ther than the date of ted, the date must be spe erted in this block door date on the Departm	wific and car es not mee ent of Stat	nnot be prior at the applic e's records.	able statuto	ry filing req	ian 90 days afte uirements, th	is date will not	be listed
	es a delayed effect efter the record is		e, but no	t an effec	tive time	, at 12:01	a.m. on the	earlier (
ated May	15	<u>.</u>	7018					

Page 3 of 3

Filing Fee: \$25.00