## 118000153423

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## **COVER LETTER**

TO:	Registration Se Division of Cor			
eimir	FUTURE F	PHYSIQUE LLC		
SORTE	CT:	Name of Limi	ted Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		JESUS M. CLARES SR		
			Name of Person	
			Firm/Company	
		MIAMI, FLORIDA, 33012	Address 2	
		JCL.27@HOTMAIL.COM	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For furt	her information c	oncerning this matter, please ca	all:	
JESUS	S M. CLARES S	R	786 566-8597	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for the	he following amount:		
<b>■</b> \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	MAII	ING ADDRESS:	STREET/COURT	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## **FUTURE PHYSIQUE LLC** (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 06/22/2018 and assigned Florida document number L18000153423 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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>	<u>Address</u>	Type of Action
MGR	JESUS M. CLARES SR	2840 NW 97 ST, MIAMI, FL 33147	
			□ Remove
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ffective date, if other than the defan effective date is listed, the date must be something of the date inserted in this block ocument's effective date on the Dep	k does not meet the applicable sta	(op of filing or more than 90 days as stutory filing requirements.	otional) fler filing.) Pursuant to 605.020 this date will not be listed a
e record specifies a delayed of The 90th day after the recor	effective date, but not an e d is filed.	ffective time, at 12:0	1 a.m. on the earlier (
AUGUST 21ST	2018		
AUGUST 21ST			
	ignature of a member or authorized re	entesentative of a member	

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Filing Fee: \$25.00