18000 275843

(Requestor's Name)
(Address)
(nucess)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(and o chuy name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only
Childe Use Only



> D. SCOTT DEC 1 9 2018

COVER I	LETTER
----------------	--------

TO: Registration Section Division of Corporations

SUBJECT:

FLORIDA AESTHETIC SPECIALISTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN W. TYRONE III

Name of Person

Firm/Company

108 NW 76th DRIVE SUITE A

Address

GAINESVILLE, FL 32607

City/State and Zip Code CYNTHIA@REDDISHANDWHITE.COM

at (_

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN W. TYRONE III

Name of Person

352 332-1150 (_____) _____ Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

S30.00 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) 1.7 A 2:

27

MAILING ADDRESS: 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

FLORIDA	AESTHETIC SPECIALISTS LLC	•	
(<u>Name of the Limited</u>) (A	Liability Company as it now appears Florida Limited Liability Company)	on our records.)	·
The Articles of Organization for this Limited Liabi Florida document number <u>L18000275843</u>	ility Company were filed on	11/29/2018	and assigned
This amendment is submitted to amend the followi	ing:		
A. If amending name, enter the new name of th	e limited liability company her	<u>e</u> :	
PREMIERE AESTHETICS LLC			
The new name must be distinguishable and contain the word	s "Limited Liability Company," the des	ignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicabl	le:		
(Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	<u>vx</u>) registered office address on e <u>e address here</u> :	our records, <u>enter t</u>	
-	City	, Florida	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

Page 1 of 3

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
			🗆 Add
			Aud
			>
			Remove
			Change
			Add
			Change
			🖸 Add
			Remove
			Change

.



D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

. ,

· · · ·	
	> >
i let if the the date of filing:	(optional)

If the record 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, record is filed.

Dated	12 14 16	
	Juli	•
	TOHN W. TYDONE	
	Typed or printed name of signee	•

Page 3 of 3

Filing Fee: \$25.00