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COVER LETTER

Division of Corpor	ations	
SUBJECT: PT.	Perfect Touch, LLC Name of Limited Liability Company	
	Name of Limited Liability Company	
The enclosed Articles of Am	endment and fee(s) are submitted for filing.	
Please return all corresponde	nce concerning this matter to the following:	
	Chistine Torres	
	Name of Person	
	Hanager Firm/Company	
	3659 S. Miami Dreme Site 4006	
	Address	
	None Florid 33123	
	Miami, Florida 33133 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 information conce	erning this matter, please call:	
Chistino To	Drives 2786, 775-1945	
Name of Per	$\frac{1}{2}$ at $\frac{1}{2}$ \frac	
Enclosed is a check for the fo	ollowing amount:	
□ \$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status	
	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

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

(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 OG 25 2019 and assign Florida document number 19001678 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 "L.L. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
Florida document number 1900 167181 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 "L.L. Enter new principal offices address, if applicable:	
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Enter new principal offices address, if applicable:	
	C."
(Principal office address MUST BE A STREET ADDRESS)	<u>-</u>
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	f the ne
registered agent and/or the new registered office address here:	
	_
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street 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>	Name	Address	Type of Action
AMBR	Christine Torres	3659 S. Hiami DV STE4006	X Add
•		Miam: +1 33133	
			Change
SHBR	Yuleina Placencia	3659 S. Miani Dv. Ste 4006	_b\add
		Miami Fl 33133	□ Remove
			Add
			□ Remove
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fan effe <u>Sote:</u>	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
Dated _	Sep 12 (.)2019
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00