L19000 202 983

(Requestor's Name)					
(Address)					
(Address)					
(Business Entity Name)					
(Document Number)					
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COVER LETTER

TO:

Registration Section

Division of	Corporations					
	AESTHETICS LLC					
SUBJECT: Name of Limited Liability Company						
The analogad Article	es of Amendment and fee(s)	ges submitted for filing				
		-				
Please return all corr	respondence concerning this	s matter to the following:				
	FREDDY HERNA	NDEZ				
		Name of Person				
	F & Y AESTHETI	CS LLC				
	Firm/Company					
	1333 N FALKENE	BURG RD				
Address						
	TAMPA F1. 33619		· (7. : :			
		City/State and Zip Code				
	YANETMENDEZI	989@GMAIL.COM	• •			
	E-mail a	ddress: (to be used for future annual report	notification)			
For further informati	ion concerning this matter, p	please call:				
FREDDY HERNANDEZ		3059627				
Na Na	me of Person	at () Area Code Da	ytime Telephone Number			
Enclosed is a check	for the following amount:					
S25 00 Filing Fo	_		S60.00 Filing Fee. Certificate of Status & Certified Copy cadditional copy is enclosed)			
Mailing Ad		Street Addres	_			
Registration Section Division of Corporations		Registration Division of	Section Corporations			
P.O. Box 6327		The Centre of	of Tallahassee			
Tallahassee, FL 32314		2415 N. Mo	nroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F & Y AESTHETICS LLC		
(<u>Name of the Limited Liability</u> (A Florida	Company as it now appears on our record- Limited Liability Company)	<u>s.</u> 1
The Articles of Organization for this Limited Liability Co	ompany were filed on 01/16/2023	and assigned
lorida document number <u>L19000202983</u>		
This amendment is submitted to amend the following:		
a. If amending name, <u>enter the new name of the limit</u>	ed liability company here:	
WY GLOBAL INVESTMENTS LLC		
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		7
Principal office address MUST BE A STREET ADDRI	ESS)	
Inter new mailing address, if applicable:		1
Mailing address MAY BE A POST OFFICE <u>BOX</u>)		1.
Stating dualess SEAT DE A TOST OF FICE BOXY		-1
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records, <u>enter</u> (the name of the new regist
Name of New Registered Agent:		
Name Dominion of COSS and Additional		
New Registered Office Address:	Enter Florida street address	
	. Flo	rida
	City	rida 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
			□Add
			□Remove
		<u>. </u>	□Change
			□Add
			F-3 □Remove
			•
			□Ādd
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