

L19000 249603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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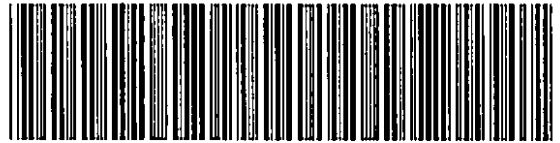
(Business Entity Name)

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05/04/20--01010--008 **35.00

2020-05-04 11:23

R. WHITE
MAY 18 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DERMA BEAUTY SPA MEDICAL CLINIC 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:

JANAICA VILCHEZ
Name of Person
DERMA BEAUTY SPA MEDICAL CLINIC LLC
Firm/Company
17090 NW 22 ST
Address
PEMBROKE PINES FL 33028
City/State and Zip Code
JANAICAREALESTATE@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JANAICA VILCHEZ at 305 6322752
Name of Person Area Code Daytime 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) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Derma

~~DERMA~~ BEAUTY SPA MEDICAL CLINIC LLC

2019

10/03/19 11:23

(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 OCTOBER 03, 2019 and assigned Florida document number L9000249603.

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.C."

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

_____, 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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

AMMENDMENT Articles of Organization
In compliance with s.605.0201, Florida Statute

OF
DERMA BEAUTY SPA MEDICAL CLINIC LLC

The undersigned subscribers OF THESE Articles of Organization each a natural person competent to contract, hereby associate themselves together to form Limited Liability Company under the Laws of the State of Florida.

ARTICLE I

The name of the corporation is: **DERMA BEAUTY SPA MEDICAL CLINIC LLC**

ARTICLE II

The purpose for which the Company is organized is:

- 1- All lawful purposes.
- 2- To engage in any activity or business permitted under the Laws of the United States and the State of Florida
- 3- Manufacture, purchase or otherwise acquire and to own, invest in, trade in, deal in with goods , wares, merchandise, real and personal property and services of every class.
- 4- To conduct business in, have one or more offices in and buy, hold, mortgage, sell, convey, lease or otherwise dispose of real and personal property including franchises, patents, copyrights, trademarks and licenses in the State of Florida, and in all other states and countries
- 5- To carry on any lawful business necessary or incidental to the attainment of the objects of this corporation whether or not such business is similar in nature to the objects enumerated in there Articles of Organization.

ARTICLE III

The capital of the Limited Liability Company is \$ 200,000.00, which consist of the aggregate of the capital contributions made as follows:

Member's Name	FRANCIE MEDINA
Member's Address	929 NW 123 AVE, MIAMI, FL 33182
Member's Capital Contribution	\$ 100,000.00 (equipment and supplies)
Member's Percentage of interest	50%

Member's Name	JANAICA VILCHEZ
Member's Address	17090 NW 22 ST, PEMBROKE PINES, FL 33028
Member's Capital Contribution	\$ 100,000.00 (equipment and supplies)
Member's Percentage of interest	50%

The Members contribution to the Company capital is described in **Schedule 2** attached to these Articles of Organization.

Additional Contributions. No Member shall be obligated to make any additional contribution to the Company's capital without the prior unanimous written consent of the Members.

No Interest on Capital Contributions. Members are not entitled to interest or other compensation for or on account of their capital contributions to the Company except to the extent, if any, expressly provided in this Agreement.

The consideration to be paid for each share shall be fixed by the board of directors and any and all shares so issued, the full consideration for which has been paid or delivered, shall be deemed full paid stock and not liable to any

further call or assessment there on; and the holders of such shares shall not be liable for any further payments thereon.

ARTICLE IV

The company will operate under an Operating Agreement is described in **Schedule 1** attached to these Articles of Organization.

ARTICLE V

The Limited Liability Company shall have a perpetual existence.

ARTICLE VI

The street address of the principal office of this LLC in the State of Florida is:

1470 NW 107 AVE SUITE M
MIAMI FL 33172

The Board of Directors, may from time to time, move the principal office to any other address in Florida. Branch offices may be maintained at such other places in the State of Florida, the United States of America and foreign countries may, from time to time, be authorized by the Board of Directors

ARTICLE VII

The mailing street address of the LLC in the State of Florida is:

1470 NW 107 AVE SUITE M
MIAMI FL 33172

ARTICLE VIII

The name and address of persons authorizes to manage this LLC are:

AMBR's Name FRANCIE MEDINA
AMBR's Address 929 NW 123 AVE, MIAMI, FL 33182


AMBR's Name JANAICA VILCHEZ
AMBR's Address 17090 NW 22 ST, PEMBROKE PINES, FL 33028

ARTICLE IX

The name and Florida street address for the registered agent is:

JANAICA VILCHEZ
17090 NW 22 ST
PEMBROKE PINES, FL 33028

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

04/16/2020

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.