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P.O. Box 6327

Tallahassee, FL 32314

	gistration Sect vision of Corp			
SUR IFCT:		DREAM S	KIN LASERS LLC ited Liability Company	
30001.01.		Name of Limi	ited Liability Company	
The enclose	d Articles of A	mendment and fee(s) are subt	mitted for filing.	
Please retur	n all correspond	dence concerning this matter	to the following:	
		IREN	VA PRIBIL Name of Person	
			Name of Person	
		DREAH	SKIN LASERS Firm/Company	LLC
		1311 W	. WEBSTER AV	<u> </u>
		WINTER PA	PRK FL 327.	89
		E-mail address: (t	NK 829 GGMAIL. Co be used for future annual report not	COM (ification)
For further i	information cor	ncerning this matter, please ca	ill:	
//	RENA	PRIBIL	at (<u>407</u>) - <u>82</u> / Area Code Daytir	1 - 6431
	Name of I	'erson	Area Code Daytin	ne Telephone Number
Enclosed is	a check for the	following amount:		
□ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	
	ailing Address:		<u>Street Address:</u> Registration Se	ection
	vision of Co		Division of Co	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		U LASER:		
(<u>Name of the Limited Liab</u> (A Flori	<mark>ility Compan</mark> ida Limited Li	y as it now appeary ability Company)	on our records.)	
The Articles of Organization for this Limited Liability Florida document number	Company v 475	vere filed on	9/11/2020	and assigned
This amendment is submitted to amend the following:				r-1
A. If amending name, enter the new name of the li	mited liabil	ity company he	<u>re</u> :	
The new name must be distinguishable and contain the words "L	imited Liabilit	y Company," the de	signation "LLC" or the a	abbreviation'"IL.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADI	DRESS)	1311 W. WINTE	WEBSTER A R PARK F	VE L , 32,789
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		13/1 W. WINTER	WEBSTER A PARK, FL	32789
B. If amending the registered agent and/or register agent and/or the new registered office address here		ldress on our re	cords, <u>enter the na</u> i	me of the new registered
Name of New Registered Agent:	IREN	JA PRIG	311	
New Registered Office Address:	1311	W. WEB	SIL SIER LUE da street address	
				327 8 9 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	IRENA PRIBIL	1311 W. WEBSTER AVE	≱ Add
		WINTER PARK, FL 32789	□ Remove
			□Change
MGR_	SITEFAN PRIBIL	1311 W.WEBSTER AUE	□Add
		WINTER PARK, FC 32789	7 '∰Remove
			🗆 Change
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reffective date is list te: If the date inse	ted, the date must be spe erted in this block do	ecific and cannot be prior	able statutory filing	re than 90 days after fil	ing.) Pursuant to 605.020° ate will not be listed as
cord specifies a de s filed.	elayed effective date,	but not an effective ti	me, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
ed Juni	, 27	. 2024 Jun	<u>/</u> .	,	
V		Tren	a Pm	1. C	
		17		<u> </u>	
	Signat	aire of a member or author	orized representative	of a member	