Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000266471 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FREEDOMIAX ACCOUNTING & MULTISERVICES, INC.

Account Number : I20180000068

Phone : (407)344-1012

Fax Number : (407)344-1371

Enter the email address for this business entity to be used for प्रिस्थित् annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LA VID ESTETICA LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Registration Section

Tallahassee, FL 32314

TO:

H-340002664713

COVER LETTER

LA VID ES SUBJECT:	STETICA LLC			
	Name of Lin	nted Liability Company		
The enclused Articles of	Amendment and (ec(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	CRISTHINA VAZQUEZ			
		Name of Person		
	FREEDOMTAX ACCOU	NTING & MULTISERVICES		,. h
		Firm/Company		
	1016 E OSCEOLA PARK	WAY		
		Address		.io
	KISSIMMEE, FL 34744		L γου γου γου γου γου γου γου γου	MHIO: HI
	.	City/State and Zip Code		HAT
	CVAZQUEZ@FREEDOM			mi -
		to be used for future annual report not	Heation)	
For further information of	oncerning this matter, please c	all:		
CRISTHINA VAZQUEZ		407 344-1012 at ()		_
Name o	f Person	at ()	e Telephone Number	_
Enclosed is a check for th	ne following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	☐ \$60.00 Filing F Certificate of S Certified Copy (additional copy S	Status &
Mailing Addres Registration S		Street Address: Registration Se	ction	
Division of C		Division of Co		
P.O. Box 632		The Centre of T	Tailahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LA VID ESTETICA LLC		
(Name of the Lin	nlted Liability Company as it now ap (A Florida Limited Liability Compa	peurs on our records.)
The Articles of Organization for this Limited	12/17/2020 and assigned	
Florida document number L20000394614	·	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, <u>enter the new name</u>	of the limited hability compan	y here:
The new name must be distinguishable and contain the	words "Limited Liability Company," (•
Enter new principal offices address, if appl	4- } 	
Principal office address MUST BE A STRE	ET ADDRESS)	'
	ــــــــــــــــــــــــــــــــــــــ	
		·
Enter new mailing address, if applicable:	4,4,	
Mailing address MAY BE A POST OFFICE	E BOX)	
B. If amending the registered agent and/or agent a <u>nd/or the new registered office addr</u>		ir records, <u>enter the name of the new register</u>
Name of New Registered Agent:		
New Registered Office Address:	14327 SW 135 AVE	
	Enter	Florida sti eet address
	MIAMI	Florida ²³¹³⁶
	Ciŋi	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.

Manuel S. Device.

If Changing Registered Agent, Signature of New Registered Agent

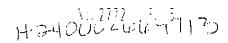
· Aug. \$ 2024 12:44FW

H3400 1: 27724 1: 5

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>	Type of Action
MGR	NUBIA K MOLINA	14327 SW 135 AVE	DAdd
		MIAMI, FL 33186	■Remove
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AND ADD EIN 86-135953	2		
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tive date, if other thun the	date of filing:	(op	tional)
If the date inscried in this b	st be specific and cannot be prior to date look does not meet the applicable st	anitory filing requirements, t	
nent's effective date on the D	epartment of State's records.		
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led.	e date, but not an effective time, at	TE, Of all its title carries of	(c) The boll: day after
ATTOTION S	202.1		
	2024		
Manuel 9	5. AND Co. Signature of a member or authorized r		