# 121000003857

(Re	questor's Name)	
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Du	Siness Entity Han	ne,
(Da		
(LC	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	- <u>-</u> -	

Office Use Only



100372473671

08/30/21--01013--005 \*\*25.00

2021 AUS 30 PM 12: 43

FI PRUCE SEP 1 1 2021

Koreme A SUBJECT:	nti-Aging & Aesthetics Group	LLC
SUBJECT:	Name of Lin	aited Liability Company
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.
Please return all corresp	ondence concerning this matter	to the following:
	GUILLERMO A PATINO	
		Name of Person
		Firm/Company
	1615 BAYSHORE DRIVE	Address
	MIAMI, FL 33133	Address
	gilrad74@gmail.com	City/State and Zip Code
		to be used for future annual report notification)
For further information	concerning this matter, please c	all:
JESUS M QUINTERO		305 450-5222 at ()
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 & ☐ \$60.00 Filing Fee;  Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of C P.O. Box 633	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO:

Registration Section Division of Corporations

## TO ARTICLES OF ORGANIZATION **OF**

### KOREME ANTI-AGING & AESTHETICS GROUP LLC

(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 I	Liability Company were file	ed on 12/23/2020	and assigned
Florida document number L21000003857	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability con	<u>ipany here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Compa	iny," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
	<del></del>	-	
Enter new mailing address, if applicable:			
(Mailing address MAY RE A POST OFFICE	<u></u>		
B. If amending the registered agent and/or agent and/or the new registered office address.  Name of New Registered Agent:	registered office address (	on our records, enter the na	me of the new reg
agent and/or the new registered office addre	ess here:		707
	GUILLERMO A PATIN	'n	
Name of New Registered Agent:	- GOILLERNIO A FATIS	· · · · · · · · · · · · · · · · · · ·	<del></del>
New Registered Office Address:	1615 BAYSHORE DRIV		•
		Enter Florida street address	
	MIAMI	Florida <u>3</u>	313321 - E
	City		Zip Code Co

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply we 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 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

#### or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Ac
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			Change
			□Add
			□Remove
			□ Add
		<del> </del>	
			□Remove
			□Change
			□Add
			□Remove

287 AUG 3C FX[2: 43									
30 F3: 12: 12:							<del></del>		
30 30 73 73 74 75 75 75 75 75 75 75 75 75 75									
							<del></del>	*-	
									·
						1. 2	<u> </u>		
					· · · · · · · · · · · · · · · · · · ·				
							<del></del>		
								·	
									7H 17
									( -
	<del></del>							į.	
								****	<u>-</u>
						-			<u>.</u> نات
date, if other than the date of filing: (optional) redate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to	Effective date, if other than the	date of fil	ling;	e prior to do	to of tiling o	r more than C	(option	(T)	
	d is filed.								
	AUGUST 24 Dated		20217	) 					
GUST 24 20217	///	,	12	=		_			
GUST 24 20217									
GUST 24  20217  Signature of a member or authorized representative of a member	Qu	Signature of	a member o	or authorized	l representa	ive of a men	ber		