121000042273

(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
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Y SUILKER

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500	
ACCOUNT NO.	: I2000000195
REFÉRÈNCE	: 630671 7840661
AUTHORIZATION	Sould de man
COST LIMIT	: \$ 30.00
ORDER DATE : January 20, 2021	
ORDER TIME : 12:32 PM	
ORDER NO. : 630671-010	
CUSTOMER NO: 7840661	
DOMESTIC AM	ENDMENT FILING
NAME: ONEBEAUTIFULLI	FE LLC
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCOM	RPORATION
PLEASE RETURN THE FOLLOWING AS 1	PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STAI	NDING
CONTACT PERSON: Eyliena Baker	EXT#

EXAMINER'S INITIALS:

COVER LETTER

	egistration Se ivision of Co			
CHD IECT	ONEbeatif			
SUBJECT	i:	Name of Lim	ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
			Name of Person	
			Firm/Company	
			Address	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report no	ntification)
For further	information o	concerning this matter, please c	all:	
	Name o	f Person	at ()	me Telephone Number
Enclosed is	s a check for the	he following amount:		
□ \$25.00	Filing Fee	S30.00 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)
	lailing Addres		Street Address: Registration S	ection
	_	Corporations	Division of Co	
	O. Box 632		The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ONEb e atifu	llife LLC	
(Name of the Limited Liability Comp. (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/21/2021	and assigned
Florida document number L21000042273		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
ONE Beautiful Life LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		ر دی
Enter new mailing address, if applicable:		سست د سنت اهدویو ن
(Mailing address MAY BE A POST OFFICE BOX)		TE p1
	:	und de
		型 32
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name	of the new registered
Name of New Registered Agent:		
Name of New Registered Agent.	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida street address	
	enter rioriau sireet aaaress	
	, Florida	77. 6. 4.
	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 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 Title Name Address Type of Action ___ □Remove _____ □Change □Add _____ Change _____ Change _____ Remove _____ □Change _____ □Change __ □Add ______ □Remove

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Note:	ive date, if other than the date of filing: [cective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed attent's effective date on the Department of State's records.
recor l is fi	od specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	1and Dames
	Signature of a member or authorized representative of a member
	//

Filing Fee: \$25.00