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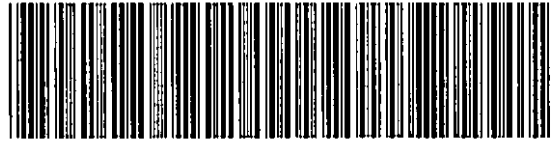
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2021 OCT 25 PM 3:33
SECRETARY OF STATE
PAUL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SKIN CARE LUNA 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:

GINA MARCELA RODRIGUEZ OSORIO

Name of Person

SKIN CARE LUNA LLC

Firm/Company

500 NW 2ND AVE 13063

Address

MIAMI FL 33101

City/State and Zip Code

gmrosorio@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GINA MARCELA RODRIGUEZ OSORIO at (1) 7867921911

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**

FILED

SKIN CARE LUNA, LLC

2021 OCT 25 PM 3:33

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 04/13/2021 and assigned Florida document number L21000171431.

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)

5510 Lyons RD, Coconut
creek 33073

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

500 NW 2ND AVE 13063
MIAMI FL 33101

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:

5510 Lyons RD Coconut creek
Enter Florida street address
Coconut creek, Florida 33073
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>
<u>MGR</u>	<u>GINA MARCELA RODRIGUEZ Ocasio</u>	<u>5510 Lyons RD coronot creek 33073</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

AMBR GINA MARIELA RODRIGUEZ OSORIO / 5510 LYONS RD COCONUT ~~CR~~ Add
creek 33073. ☐ Remove

_____ ☐ Change

☐ Add

[Remove](#)

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☐ Add

[Remove](#)

_____ ☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please I need in authorized person
is GINA MARCELA RODRIGUEZ OSORIO
of the company and the
new address 5510 Lyons rd, Coconut
Creek 33073. thanks.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _____



Signature of a member or authorized representative of a member

GINA MARCELA RODRIGUEZ OSORIO

Typed or printed name of signee