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COVER LETTER

TO:	Registration Sect Division of Corp		
	The Refiner	ry Aesthetics and Laser Cen	iter LLC
SUBJEC	CT:	Name of Limit	ed Liability Company
The encl	osed Articles of A	mendment and fee(s) are subn	nitted for filing.
		dence concerning this matter to	
			Name of Person
		Ti D. F. A. Albakina	
		The Refinery Aesthetics	Firm/Company
		2500 Sunset Point Road	
	Address		
			7140.744
		Clearwater, FL 33765	
		<u> </u>	City/State and Zip Code
		E-mail address: (I	to be used for future annual report notification)
For furti	ner information co	oncerning this matter, please ca	all:
	s Hooten, Jr.	·	727 4154588
	Name of	Person	Area Code Daytime Telephone Number
Enclose	d is a check for th	e following amount:	
■ \$25	.00 Filing Fce	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of C P.O. Box 632	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	Tallahassee, F	*L 32314	Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Refinery Aesthetics and Laser Center 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 Liability Company were filed on ______ and assigned Florida document number _______. 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 "LI.C" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: **ERNEST TRAYNHAM** Name of New Registered Agent: **468 CARDINAL DRIVE** New Registered Office Address: Enter Florida street address

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.

SATELLITE BEACH

If Changing Registered Agent, Signature of New Registered Agent

__, Florida 32937
Zip Code

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>	Name	Address	Type of Action
MGR	ERNEST TRAYNHAM	468 CARDINAL DRIVE	■Add
		SATELLITE BEACH, FL 32937	□Remove
			Change
			□Add
			Remove
			[]Change
			□Add
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fective date, if other than the	8/10/20)22	(a 4	-IV
in effective date is listed, the date must	be specific and cannot be p	prior to date of filing or r	option (option) nore than 90 days after fil	ing.) Pursuant to 605,020
ote: If the date inserted in this blocument's effective date on the De	partment of State's reco	pricable statutory fili rds.	ig requirements, this d	ate will not be listed a
ecord specifies a delayed effective is filed.	date, but not an effective	ve time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after th
				
August 10th	2022			
	signature of a member or a	uthorized representative	of a member	