

L21000234612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

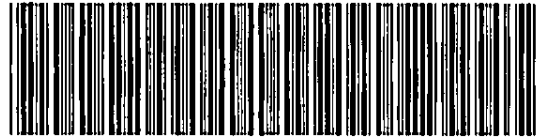
(Document Number)

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NIC & Amend

CP 101234-01042-110 444.00

FILED  
2022 MAR 14 AM 8:32

A. RAMSEY

APR -4 2022

Alicia Johnson gave  
permission to change her  
title to MGR and  
Amarion's title to AP

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Butterfly Beauty and Wellness 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:

Alicia M. Johnson

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

6613 Emil Ave.

\_\_\_\_\_  
Address

Cocoa Florida 32927

\_\_\_\_\_  
City/State and Zip Code

aliciamj22@yahoo.com

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

For further information concerning this matter, please call:

Alicia Johnson

321 458-2679  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 28, 2022

ALICIA M. JOHNSON  
6613 EMIL AVE.  
COCOA, FL 32927

SUBJECT: BUTTERFLY BEAUTY AND WELLNESS LLC  
Ref. Number: L21000234612

We have received your document for BUTTERFLY BEAUTY AND WELLNESS LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler  
Regulatory Specialist II

Letter Number: 422A00007153

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

2022 MAR 14 AM 8:32

Butterfly Beauty and Wellness 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 March 9, 2022 and assigned  
Florida document number L21000234612.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Butterfly Beauty and Wellness Massage and Spa LLC

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)

1980 N. Atlantic Ave. #5 II

Cocoa Beach Florida

32931

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

6613 Emil Ave.

Cocoa Florida

32927

**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:

*Enter Florida street address*

Florida

*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>Alicia M. Johnson</u>	<u>6613 Emil Ave.</u>	<input checked="" type="checkbox"/> Add
		<u>Cocoa Florida</u>	<input type="checkbox"/> Remove
		<u>32927</u>	<input type="checkbox"/> Change
<u>AP</u>	<u>Amariyon M. Lawrence</u>	<u>6613 Emil Ave.</u>	<input type="checkbox"/> Add
		<u>Cocoa, Florida 32927</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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 March 9, 2022

Alicia M. Johnson  
Signature of a member or authorized representative of a member

Alicia M. Johnson

Typed or printed name of signee