

K21 000362880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A.

Office Use Only



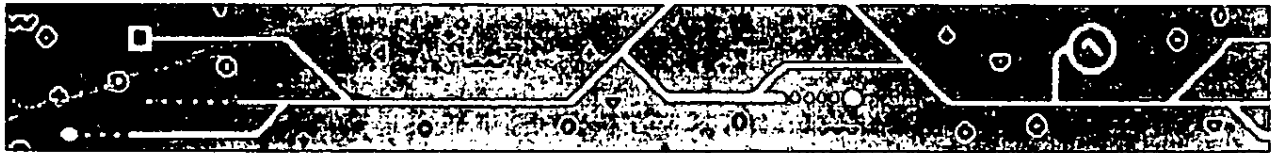
000392769850

08/22/22--01016--023 **25.00

2022 AUG 22 AM 9:38

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS

J DENNIS
NOV 08 2022



zenbusiness

Aug 16, 2022

Florida Secretary of State
Division of Corporations
2415 N Monroe St Suite 810
Tallahassee, FL 32303

RE: StoneLife Beauty LLC

To Whom It May Concern:

Attached please find the executed Articles of Amendment, for the above referenced.
Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

**ZenBusiness Inc
Attention: Kelly Castro
336 E. College Ave, Suite 301
Tallahassee, FL 32301**

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you,
Kelly Castro
ZenBusiness Customer Success

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

StoneLife Beauty 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 08/12/2021 and assigned
Florida document number 121000362880.

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)

333 S. E. 2nd Avenue

Suite 2000

Miami, FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7010 Beauhaven ct

Jacksonville, FL 32258

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

[illegible]

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)

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 August 16 2022

/s/ Valeria Coleman

Signature of a member or authorized representative of a member

Valexia Coleman

Typed or printed name of signee