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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUXE WELLNESS & BEAUTY BAR LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXE WELLNESS & BEAUTY BAR LLC			•
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears nited Limbility Company)	on our records.)	
The Articles of Organization for this Limited Liability Com Florida document number L21000416754	pany were filed on	!1/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	Hability company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company," the de-	signation "LLC" or the obbre	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our re	cords, <u>enter the name</u>	of the new register
Name of New Registered Agent:	,,,,, <u></u>	<u>.</u>	Ca Ca
New Registered Office Address:			າ 
	Enter Flori	da sireet address	<u> </u>
		Florida	
	City		
New Registered Agent's Signature, if changing Registered Agent:			ė;
I hereby accept the appointment as registered agent and			

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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>	Address	Type of Action
AMBR	TAYLOR ANDERSON	3402 N ANDREWS AVE EXT	
		POMPANO BEACH, FL 33064	
			□Change
AMBR	CALI MILLER	1250 E HALLANDALE BEACH BLVD	
		STE 1002	=Remove
		HALLANDALE BEACH, FL 33009	□ Change
·			□Add
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Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	the date of filing:	optional) s after filing.) Pursuant to 605,0207 (3 s, this date will not be listed as th
ne record specifies a delayed effeord is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of	of: (6) The 90th day after the
Dated	, 2023	
	Signature of a member or authorized representative of a member	
<u> </u>	Signature of a member or authorized representative of a member	
ELISE ANDERSON		
	Typed or printed name of signer	