## 121000459019

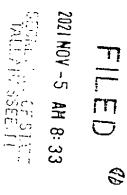
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C. BRUMBLEY

## **COVER LETTER**

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TO:

**Registration Section** 

Division of Co.	rporations		
LUXE CO	SMETICS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ULLE S BOSHKO		
		Name of Person	
	AB ACCOUNTING ASS	OCIATES I.LC	
		Firm/Company	
	2340 TECUMSEH DRIV	E	
	-	Address	
	WEST PALM BEACH FI	. 33409	
	<del></del>	City/State and Zip Code	
	ULLE@ABLLC.ORG	to be used for future annual report no	20 martin 2
Para Grant and in Comment of the			nrication)
ror lurther information of	concerning this matter, please c	an:	
ULLE S BOSHKO		561 570-5775 at ( )	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for ti	he 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	<del></del>	Street Address:	antion.
Registration ! Division of C		Registration Se Division of Co	
P.O. Box 632	27	The Centre of	•
Tallahassee,	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXE COSMETICS LLC		···
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Company	pears on our records.) ny)	
The Articles of Organization for this Limited Liability Company were filed on	10/21/2021	and assigned
Florida document number L21000459019		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company	y here:	
MO'S LUXE COSMETICS & PERFUME LLC		
The new name must be distinguishable and contain the words "Limited Liability Company," t	the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	* 1	-2
<u>,</u>	<u> </u>	21
		<u> </u>
C. A	<u> </u>	-5
Enter new mailing address, if applicable:	S.C. Mr.	<u>&gt;</u> M
Mailing address MAY BE A POST OFFICE BOX)		
<del></del>		$\frac{\alpha}{3}$
	Fis	ω
B. If amending the registered agent and/or registered office address on or	ur records, <u>enter the name</u>	of the new regist
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 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
<u>.</u>			□ Add
			🗀 Remove
			□Change
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Note: If the	ite, if other than the date of filing:  [10/18/202]  (optional)  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 605.0 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lister effective date on the Department of State's records.	0207 d d as i
record speci d is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the
Dated	. 2021	
(	Mohammade Salem	
<del></del> -	Mohammade Salem  Signature of a member or authorized representative of a member	
M	OHAMMADE SALEM	

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Filing Fee: \$25.00