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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PAVESE LAW FIRM
Account Number : I20130000057
Phone : (239)334-2195
Fax Number : (239)332-2243

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: PP9963@comcast.net

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PERFECT GLOW BY NICOLE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2022 JAN 31 PM 3:52

22 JAN 31 PM 1:47

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FEB 01 2022

T. LEMIEUX

Jan. 31. 2022 3:35PM

No. 0314 P. 2

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Perfect Glow By Nicole, 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:

Donna Pavese

Name of Person

Pavese Law Firm

Firm/Company

518 SE 9th Avenue

Address

Cape Coral, FL 33990

City/State and Zip Code

pp9963@comcast.net

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

For further information concerning this matter, please call:

Donna Pavese

239

203-8001

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

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

H88-0200 40418

Jan. 31, 2022, 3:35PM
H020000 40418

No. 0614 P. 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Perfect Glow By Nicole, 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 1/18/2022 and assigned
Florida document number L22000032957

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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

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

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No. 0914 P. 4

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>
MGR	Nicole Pavese	6618 Canton Street, Fort Myers, FL 33966	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nicole Milisci	6618 Canton Street, Fort Myers, FL 33966	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

11/22/2021/18

Jan. 31, 2022 3:35PM
Hs30008 404/8

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(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 January 31, 2022

Nicole Milner

Signature of a member or authorized representative of a member

Nicole Milisci.

Typed or printed name of signee

Filing Fee: \$25.00

482-1201 404/K