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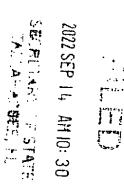
(Requestor's Name)
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PICK-UP WAIT MAIL
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COVER LETTER

то:	Registration Se Division of Cor			
SUBJE	Spa By Mor	riya LLC		,
NUBJE	CI:	Name of Limi	ted Liability Company	
The enc	losed Articles of .	Amendment and fee(s) are sub	nitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Moria Rivka Cherkovsky		
			Name of Person	
		Dedicated CPA		
			Firm/Company	
		7520 NW 5th ST STE 103		
			Address	
		Plantation, FL 33317		
			City/State and Zip Code	
		noa@dedicatedepa.com	o be used for future annual report notif	
				ication)
For furt	her information co	oncerning this matter, please ca	ilt;	
Noa He	n		813 606-2707 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne 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 S		<u>Street Address:</u> Registration Sec	ction

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Spa By Moriya 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 $\frac{01/13/2022}{1}$ and assigned Florida document number L22000037313 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Beauty Consulting By Moria LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbre 7520 NW 5th ST STE 103 Enter new principal offices address, if applicable: Plantation, FL 33317 (Principal office address MUST BE A STREET ADDRESS) 7520 NW 5th ST STE 103 Enter new mailing address, if applicable: Plantation, FL 33317 (Mailing address MAY BE A POST OFFICE BOX) 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: Moria Rivka Cherkovsky Name of New Registered Agent: 7520 NW 5th ST STE 103 New Registered Office Address: Enter Florida street address , Florida $\frac{33317}{Zin\ Code}$ Plantation City

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>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
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fective date, if other than the date must be	e specific and cannot be	prior to date of fili	ng or more than 90 day	(optional) s after filing.)	Pursuant to 605.03
ote: If the date inserted in this bloc cument's effective date on the Dep.			y filing requiremen	ts, this date	will not be listed
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ecord specifies a delayed effective c is filed.	late, but not an effec	tive time, at 12:01	a.m. on the earlier	of: (b) The	e 90th day after t
September 6th	2022				
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