L22000065997

(Request	or's Name)	
(Address)	
(Address)	.
(City/Stat	e/Zip/Phone #)	
(,	,	
PICK-UP	WAIT	MAIL
(Busines	s Entity Name)	
·	,	
(Docume	nt Number)	
(5000)	,	
Certified Copies	Cortificator of	Status
Certified Copies	Certificates of	Jaius
Special Instructions to Filing	Officer:	:
(
,		

Office Use Only



100385215211

04/07/22--61012--003 +-20.CU

SECRETARY OF STATE TALLAHASSEE, FL

O SIMMONS APR 2 2 2022

COVER LETTER

TO:

Registration Section

Division of Cor	rporations				
	N & BODY STUDIO LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Christina Vincenti				
		Name of Person			
		Firm/Company			
	465 forestway circle unit 3	03			
	-	Address			
	Altamonte Springs, FL 32	701			
		City/State and Zip Code			
	chrssina@gmail.com	to be used for future annual report no	tilication)		
For further information c	oncerning this matter, please c		, meanon,		
Christina Vincenti		321 3475350 at ()			
Name o	f Person		me Telephone Number		
Enclosed 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Devistration Section		Street Address:	ection		
Registration Section Division of Corporations		-	Registration Section Division of Corporations		
P.O. Box 632		The Centre of			
Tallahassee, l	[*] L 32314	2415 N. Monr	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT LED TO ARTICLES OF ORGANIZAMPONS AH 7: 55 OF CEORGAN

SECRETARY OF STATE TALLAHASSEE, FL

~NA SKIN & BODY STUDIO 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 $\frac{2/8/202}{}$	and assigned
Florida document number L22000065997		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Ïna's Studio LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1950 lee rd suite 117	Winter Park, FL 32789
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	1950 lee rd suite 117	Winter Park, FL 32789
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:		us, enter the hanc of the new registered
New Registered Office Address:		
	Enter Florida s	
	City	, Florida Zip Code
Now Designated Asset's Signature if shoughts Designated Assets		Zip Cone
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my oprovided for in Chap	duties, and I am familiar with and ner 605, F.S. Or, if this document is
If Char	nging Registered Agent, S	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
			
			Remove
			Change
			□Add
			Remove
			Change
			□ Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

		•			
					
_					
					
				-··	
	<u> </u>				
					
				-	
-			*		
(If an effect <u>Note:</u> If		be specific and cannot be prock does not meet the app	ior to date of filing or n licable statutory filin	(optional) we than 90 days after filing.) Poger requirements, this date will	
f the record s record is filed		e date, but not an effective	e time, at 12:01 a.m.	on the earlier of: (b) The 9	0th day after the
Dated Ma	arch 24th	. 2022	·		
		Signature of a member or au	thorized representative	of a member	
	Christina Vincenti				
	_	Typed or pr	nted name of signee	<u> </u>	

Filing Fee: \$25.00