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Special Instructions to		
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S. PRATHER

COVER LETTER

TO:

Registration Section

Division of C	orporations		
(3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	eace LLC		
SUBJECT:	Name of Lim	nited Liability Company	 _
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Rodrigo Garcia		
		Name of Person	
	Skin at Peace LLC.		
		Firm/Company	
	2029 Okeechobee BLVD	#1143	
		Address	
	West Palm Beach, FL 334	09	
		City/State and Zip Code	
	Rod@skinatpeace.com	to be used for future annual report not	· ·
For further information	n concerning this matter, please c	-	(Incation)
Rodrigo Garcia		954 505-6834	
Name	e of Person	Area Code Daytin	ne 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)
<u>Mailing Addi</u> Registration		Street Address: Registration Se	ection
Division of	Corporations	Division of Co	rporations
P.O. Box 6. Tallahassee	327 - FL 32314	The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Skin at Peace LLC			2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(<u>Name of the Limited</u> (/	L <mark>Liability Compan</mark> V Florida Limited Li	iy as it now appeary on our records.) lability Company)	一种 -4		
The Articles of Organization for this Limited Liab Florida document number 1.22000103345			AH Condessigned		
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabil	lity company here:			
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ty Company," the designation "LLC" or the abbr	eviation "L.L.C."		
Enter new principal offices address, if applical	ble:	2029 Okeechobee BLVD #1143			
(Principal office address MUST BE A STREET ADDRESS)		West Palm Beach, FL 33409			
		2029 Okeechobee BLVD #1143			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		West Palm Beach, FL 33409			
		west rann beach. FL 33409			
B. If amending the registered agent and/or regagent and/or the new registered office address		ddress on our records, enter the name	of the new registered		
Name of New Registered Agent:	Rodrigo Garcia				
New Registered Office Address:	2029 Okeechobe	ee BLVD #1143			
		Enter Florida street address			
	West Palm Beac	h, Florida 3340	9		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zin Code

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>	Type of Action
COO	Rodrigo Garcia	2029 Okeechobee BLVD #1143	■Add
		West Palm Beach, FL 33409	□Remove
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effective date is listed, the date i	nust be specific and cannot?	be prior to date of fili	ng or more than 90 da	_ (optional) ays after filing.) l	Pursuant t	o 605.020
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