## 122000129361

(Requestor's Name)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<del></del>
Special Instructions to Filing Officer:	
	:

Office Use Only



300393215313

98/29/22--91922--904 \*+25.99

2022 AUG 29 PM 3: 39
SECRETARY OF STAT

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Te Ne Sais Qual Aesthetics 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:
Rue Neene Newton  Name of Person  Je Ne Sais Quoi Aesthetics  Firm/Company
2620 Dade Ave
Panama City Beach FL 32408  City/State and Zip Code  RueNeeneNewton Ramail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  Rue Neene Newton at (850) 358-7845  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:    \$\forall \\$25 00 \text{ Filing Fee}  \\$30.00 \text{ Filing Fee & Gertificate of Status}   \text{Certified Copy (additional copy is enclosed)}   \qua
Mailing Address:  Registration Section  Street Address:  Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Je Ne Sais Quoi Ae	esthetics
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2200012936/</u>	were filed on March 15th 2022 and assigned
Principal office address MUST BE A STREET ADDRESS)	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable:	ility Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	233 East Beach Drive Pavama City, FL 32401
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new Feristerett HASSE
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	Emer Florida street address
	, Florida

## 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			DAdd
			□Remove
		<del></del>	□ Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Remove
			□Change

				<del></del>
				_
			· -	_
				_
				_
******				<del></del>
			-	_
		·····		_
				_
			· · · · · · · · · · · · · · · · · · ·	
				_
				_
				_
Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	lock does not meet the app	plicable statutory filing requ	222 (optional) an 90 days after filing.) Pursuant to 6 aurements, this date will not be I	505 0207 ( isted as t
ne record specifies a delayed effection of is filed.	ze date, but not an effectiv	e time, at 12:01 a m, on the	earlier of: (b) The 90th day a	fter the
Dated 8/23/  Bul Neene Nee	202	2		
P.1	( <del>1</del>			

Typed or printed name of signee