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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Corpo		•		
SUBJECT: SKIN CARE	BY MARINA LLC			
		ted Liability Company		
		_		
	JASON KERSHANICK			
	CARE BY MARINA LLC Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: JASON KERSHANICK Name of Person SKIN CARE BY MARINA LLC Firm: Company 434 NW SUNFLOWER PLACE Address JENSEN BEACH FL 34957 City/State and Zip Code JOE@TAXSHOPPEFLA.COM E-mail address: (to be used for future annual report notification) stion concerning this matter, please call: NICK and of Person at (772 Area Code Daytime Telephone Number			
	SKIN CARE BY MARINA	A LLC		
		Firm/Company		
	434 NW SUNFLOWER PI	LACE		
		Address		
	JENSEN BEACH FL 3495	7		
	•	City/State and Zip Code		
	_			
	E-mail address: (t	o be used for future annual repo	ort notification)	
For further information con	cerning this matter, please ca	all:		
JASON KERSHANICK		at (772) 834-5	542	
Name of F	erson	Area Code	Daytime Telepho	ne Number
Enclosed is a check for the	following amount:			
□ \$25.00 Filing Fee		Certified Copy		Certificate of Status & Certified Copy

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF ORGANIZATION

OF

2024 APR -8

Put 1: 05

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

SKIN CARE BY MARINA LLC

The Articles of Organization for this Limited Liah	21. A PRIL 12 2022	1.11/2
	ility Company were filed on APRIL 12 2022	and assigned
Florida document number L22000175040		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
PLAYERS CARTS LLC		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:		_ _
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address in Name of New Registered Agent:		name of the new registered
agent and/or the new registered office address l	here:	name of the new registered
agent and/or the new registered office address I Name of New Registered Agent:		name of the new registered
agent and/or the new registered office address I Name of New Registered Agent:	Enter Florida street address	<u> </u>
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address , Florida City	name of the new registered
agent and/or the new registered office address I Name of New Registered Agent:	Enter Florida street address , Florida City	<u> </u>

If Changing Registered Agent, 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
			□Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			
			□Add
			Remove
			□Change
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ective date, if other than t	he date of filing: MARCI	H 31 2024	(optional)	(05.000)
			han 90 days after filing.) Pursuant to quirements, this date will not be	
ument's effective date on the				
cord specifies a delayed effec	tive date, but not an effective	ve time, at 12:01 a.m. on the	he earlier of: (b) The 90th day	after the
s filed.				
ed APRIL 1	2024			
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Typed or printed name of signee