

L23000042665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

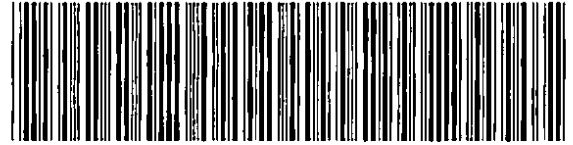
(Business Entity Name)

(Document Number)

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LLC Amend

07/12/24--01036--028 \*\*25.00

FILED  
2024 JUL 12 PM 12 56  
CLERK OF STATE  
A. RAMSEY, T1 0210

JUL 25 2024  
A RAMSEY

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Samzen Skin Co.  
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:

Brian Douglas Mann  
Name of Person

Samzen Skin Co.  
Firm/Company

1313 NW 42nd Ave  
Address

Cape Coral, FL 33993  
City/State and Zip Code

samzenskinco@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Douglas Mann at ( 704 ) 663-9261  
Name of Person Area Code Daytime 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)

**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  
OF

FILED

2024 JUL 12 PM 12 56

Samzen Skin Co, LLC

(Name of the Limited Liability Company as it now appears on our records, TARY OF STATE  
(A Florida Limited Liability Company) )

The Articles of Organization for this Limited Liability Company were filed on January 23, 2023 and assigned  
Florida document number 1.23000042665.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

1313 NW 42nd Ave, Cape Coral, FL 33993

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

1313 NW 42nd Ave, Cape Coral, FL 33993

**(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:**

**Name of New Registered Agent:**

Brian Douglas Mann

**New Registered Office Address:**

1313 NW 42nd Ave

*Enter Florida street address*

Cape Coral

*City*

Florida 33993

*Zip Code*

**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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Sharron A. Mann	1313 NW 42nd Ave	<input type="checkbox"/> Add
		Cape Coral, FL 33993	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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