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## **COVER LETTER**

			19.
CI:		ited Liability Company	
losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
eturn all correspo	ondence concerning this matter	to the following:	
	LADY J RODRIGUEZ		
		Name of Person	
	LAMAVER SPA LLC		
	<del> </del>	Firm/Company	
	11557 BENTRY STREET		
		Address	
	ORLANDO, FL 32824		
		City/State and Zip Code	
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her information c		·	oditeation)
J RODRIGUEZ		321 3446365	
Name o	f Person		ime Telephone Number
d is a check for the	ne following amount:		
.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)
		Street Address: Registration S	Section
Division of Corporations		Division of Co	orporations
•		The Centre of	Tallahassee roe Street, Suite 810
	her information c  J RODRIGUEZ  Name of the control	Name of Lim  losed Articles of Amendment and fee(s) are subseturn all correspondence concerning this matter  LADY J RODRIGUEZ  LAMAVER SPA LLC  11557 BENTRY STREET  ORLANDO, FL 32824  lamaverspa@gmail.com  E-mail address: ( ther information concerning this matter, please of J RODRIGUEZ  Name of Person  d is a check for the following amount:  1.00 Filing Fee  \$\Begin{array} \$30.00 \text{ Filing Fee & Certificate of Status} \\  Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Division of Corporations  LAMAVER SPA LLC  The Space of Limited Liability Company  Rosed Articles of Amendment and fee(s) are submitted for filing.  LADY J RODRIGUEZ  Name of Person  LAMAVER SPA LLC  Firm/Company  11557 BENTRY STREET  Address  ORLANDO, FL 32824  City/State and Zip Code  lamaverspa@gmail.com  E-mail address: (to be used for future annual report in their information concerning this matter, please call:  J RODRIGUEZ  Name of Person  Area Code  Days  d is a check for the following amount:  .00 Filing Fee Scertificate of Status  Certificate Copy (additional copy is enclosed)  Mailing Address:  Registration Section  Division of Corporations  P.O. Box 6327  The Centre of

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAMAVER SPA LLC			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
he Articles of Organization for this Limited Liability Company	were filed on 01/30/2023	and assigned	
florida document number L23000054380			
This amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liab	ility company here:		
HARMONY L&A SPA LEC			
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the ab		
Inter new principal offices address, if applicable:	8421 S Orange Blossom Trl Ste 125	2023	
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32809		
		20	
Enter new mailing address, if applicable:		AM II:	
Mailing address MAY BE A POST OFFICE BOX)		27	
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, enter the nam	e of the new regis	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Florida		
	Chy	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>	Name	Address	Type of Action
			□Add
			□ Remove
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ective date, if other than the eleffective date is listed, the date must te: If the date inserted in this blooment's effective date on the De	be specific and cannot be pock does not meet the app	rior to date of filing or blicable statutory fili		ling.) Pursuant to	
cord specifies a delayed effective s filed.	date, but not an effectiv	e time, at 12:01 a.m	, on the earlier of: (b)	The 90th day	after th
JULY 17	. 2023	·•			