

L 23000061514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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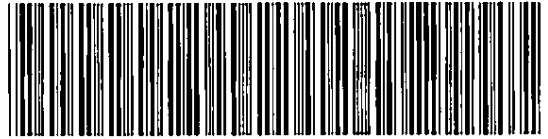
(Business Entity Name)

(Document Number)

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ALABAMA

A. RIVERS

MAY - 5 2023

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Kreme De La Kreme Skin LLC  
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:

Leslie Miller  
Name of Person  
Firm/Company  
2555 NW 155th Terr  
Address  
Miami, FL 33054  
City/State and Zip Code  
support@KDKCares.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Miller 407 715-3305  
at ( )  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Kreme De La Kreme Skin LLC

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

The Articles of Organization for this Limited Liability Company were filed on February 02, 2023 and assigned Florida document number L23000061514.

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:

(Principal office address MUST BE A STREET ADDRESS)

1000 Brickell Ave

Ste 715, PMB 1302

Miami, FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2555 NW 155th Terr

Miami Gardens, FL 33054

**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:

Leslie Miller

New Registered Office Address:

2555 NW 155th Terr

*Enter Florida street address*

Miami Gardens

Florida 33054

*City*

*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	Nijah Miller	1000 Brickell Ave Ste 715	<input type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
CEO	Nijah Miller	1000 Brickell Ave	<input checked="" type="checkbox"/> Add
		Ste 715, PMB 1302	<input type="checkbox"/> Remove
		Miami, FL 33131	<input type="checkbox"/> Change
AMBR	Jessica Mackey	Complete Desires Consultancy Firm	<input type="checkbox"/> Add
		640 NW 183rd Street	<input checked="" type="checkbox"/> Remove
		Miami Gardens, FL 33169	<input type="checkbox"/> Change
AMBR	Leslie Miller	2555 NW 155th terr	<input checked="" type="checkbox"/> Add
		Miami Gardens, FL 33054	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.



Typed or printed name of signee