

L230000187115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

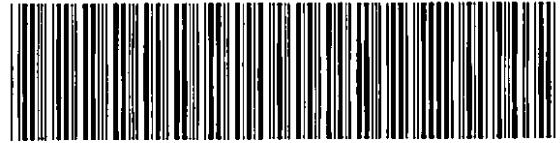
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2023 JUN 29 10:03:23

S. ROBERTS

JUN 29 2023



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2023

NORMA OJEDA
1228 FAIRFAX LN
LAKELAND, FL 33813 US

SUBJECT: LUMINA SKIN & AESTHETICS LLC
Ref. Number: L23000187115

We have received your document for LUMINA SKIN & AESTHETICS LLC .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

Missing signature of authorized representative.

If you have any questions concerning the filing of your document, please call
(850) 245-6000.

STANTON H ROBERTS
Regulatory Specialist III

Letter Number: 523A00013490

* Signature has been
placed on back,
filing fee was sent
with initial application
in the form of a
check. Signature and
date were forgotten
but have now been
added. Thank you!

RECEIVED

JUN 28 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lumina Skin & Aesthetics 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:

Norma Ojeda
Name of Person

Lumina Skin & Aesthetics LLC
Firm/Company

1228 Fairfax N
Address

Lakeland, FL 33813
City/State and Zip Code

NormaOjeda18@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Norma Ojeda at (863) 528-6678
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**

Lumina Skin & Aesthetics 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 04/17/2023 and assigned
Florida document number L23000187115.

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)

Enter new mailing address, if applicable:

(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:

New Registered Office Address:

Enter Florida street address

Florida

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>
AMBR	Norma Ojeda	1228 Fairfax N	<input checked="" type="checkbox"/> Add
		Lakeland, FL 33813	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Clinton Robles	1228 Fairfax N	<input type="checkbox"/> Add
		Lakeland, FL 33813	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated

6/24/23

Signature of a member or authorized representative of a member

Norma Ojeda

Typed or printed name of signee