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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number: I20220000070 : (888)462-3453 Fax Number : (877)919-2613

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUXE N BODIED AESTHETICS LLC

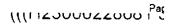
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COVER LETTER



TO: Registration Section
Division of Corporations

SUBJECT:	LUXE N BOI	DIED AESTHETICS LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
	Tricles of Amendment and fee(s) are submitted for filing. LOVETTE DOBSON Name of Person		
		Firm/Company	
	17350 STATE HWY 249 S	STE 220	
		Address	
	HOUSTON, TX 77064		
	rei rial encen r co		Name of Person Firm/Company 220 Address Sity/State and Zip Code e used for future annual report politication) 888-462-3453 at (
			polification)
For further information c		·	
LOVETTE DOBSON		888-462-	3453
Name o	f Person	Area Code Da	aime Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status		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 OF

LUXE N BODIED AES	THETICS LLC		
(Name of the Limited Liability Company as (A Florida Limited Liability)	it now appears	on our records.)	
The Articles of Organization for this Limited Liability Company were Florida document number	e filed on	05/22/2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the de-	signation "LEC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			<u> </u>
(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 addre	ess on our rec	cords, enter the n	ame of the new register
agent and/or the new registered office address here:			023
			·. .
Name of New Registered Agent:			r >
N. D 100" A11			C5
New Registered Office Address:	Enter Floria	la street address .	· 3x
	12.02.0	,	. ယု
		, Florida ;	· Zip'Code
	City	`	· Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree to			
provisions of all statutes relative to the proper and complete perfo accept the obligations of my position as registered agent as provi			

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

16 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
AMBR	Natia Benton	18709 Nw 14th Street	≅ Add
		Pembroke Pines, FL 33029	
			☐Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			
		□Remove	
			☐Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

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fective date, if other than to methodise date is listed, the date is	The date of Jumg: most be specific and cumot be or	ior to date of tiling or more tha	(optional) n 90 days after filing.) Pursuant to 6	05 0207 <i>i</i>
<u>ote:</u> If the date inserted in this	s block does not meet the app	licable statutory filing requ	irements, this date will not be I	isted as the
coment's effective date on the	: Department of State's recor	ds.		
ecord specifies a delayed effec	ctive date, but not an effective	e time, at 12:01 a.m. on the	earlier of: (b) The 90th day at	ter the
is filed.				
June 27th	7(1)2			
0.610 2.7111				
ited				
ted	. 2023			
ated	Nignature of a member or at	ountry Bradl	24	

Filing Fee: \$25.00

Typed or printed name of signee