123000260650

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24 SEP 20 Par 4: 48

COVER LETTER

	FESTHETICS LLC				
SUBJECT: Name of Limited 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:			
	Mike Town				
		Name of Person			
	Legalzoom.com, Inc.				
		Firm/Company			
	9900 Spectrum Dr				
		Address	·		
	Austin, TX 78717				
	· -	City/State and Zip Code	<u> </u>		
	alexandraamlaw@gmail.co				
	E-mail address: (to be used for future annual report no	otification)		
For further information of	concerning this matter, please ea	all:			
Mike Town		800 773-0888			
Name o	of Person	at () Area Code Daysi	ime Telephone Number		
Enclosed is a check for t	he 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

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RADIANT ESTHETICS LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company Horida document number 1.23000260650	were filed on 05/30/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
	iver and a distribution of Letter	as the alaboration of 1.0 "
The new name must be distinguishable and contain the words "Limited Liabi	10 North Pinellas Ave.,	or the annieviation Tallic.
Enter new principal offices address, if applicable:	Tarpon Springs, Fl 3-4689	- 12
Principal office address MUST BE A STREET ADDRESS)	raipon oprings, 17.5-402	70
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		#: L8
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records, re:	enter the name of the
New Registered Office Address:	Enter Florida street address	
	, Flo	rida
	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>	Type of Action
			□ Remove
			Change
			Remove
			☐ Change
			Add
			☐ Remove
			□ Change
			D Add
			Remove
			□ Change
			O Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			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: (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 605,0205. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 o (b) The 90th day after the record is filed.
Dated September 7 2024.
Signature of a member or authorized representative of a member
Ms Alexandra Amlaw
Typed or printed name of signee

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Filing Fee: \$25.00