123000284104

(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

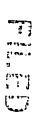


600432052066

07/10/24--01013--025 **25.00

KH4 418154

2024 JUL 10 AM 8: 23
SECRUTARY OF STATE
TAIL AREASCRE FI



COVER LETTER

TO: Registration Secti Division of Corpo				
SUBJECT:	on Rejuv Name of Lim	e Mition ited Liability Company		
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
	Ron_	Kman Name of Person		
		Firm/Company		
	18605 Bra	denton rd		
	Fort Mye	rs Fl 3396 Tity/State and Zip Code	7	
		on 47 @ gmail.		
For further information con-	cerning this matter, please ca	ill:		
Ron Kn Name of Pe	crson	at (<u>239</u>) <u>4/0 - 9</u> Area Code Daytime	E Telephone Number	
Enclosed is a check for the f	following amount:			
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Statps & Certified Copy	
Mailing Address:		Street Address: Registration Sec	TON SET A	
Registration Section Division of Corporations		Division of Corp	porations $\mathcal{F}_{\mathcal{F}_{\mathcal{F}_{\mathcal{F}}}}^{\mathcal{F}_{\mathcal{F}_{\mathcal{F}}}}$) [`] +=*
P.O. Box 6327		The Centre of T		၁ ၁
Tallahassee, FL 32314		2415 N. Monroo Tallahassee, FL	e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	Rejuveration LLC ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Lie Florida document number <u>423000 284</u>	ability Company were filed onand assigned
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE)	T ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office address on our records, enter the name of the new registered
Name of New Registered Agent:	Automn Tuthill
New Registered Office Address:	551 Libby Alico Cd Enter Florida street address
	Fort Wyers Florida 33827
New Registered Agent's Signature, if changing R	egistered Agent:
provisions of all statutes relative to the prope accept the obligations of my position as regis	I agent and agree to act in this capacity. I further agree to comply with the rand complete performance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S. Or, if this document is registered office address, I hereby confirm that the limited diability change.

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>	Address	Type of Action
			□Add
			Remove
			□Change
			
			□ Remove
			□Change
			Remove
			
			□Add
			□Remove
			□ Change
			SECOLUTION SECONDARY
			Strange Strang
			□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 20th day figer the record is filed. Signature of a member or authorized representative of a member

Filing Fee: \$25.00