

L230003A2S3S

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

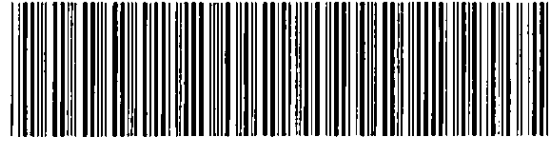
(Business Entity Name)

(Document Number)

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08/04/23--01009--007 **25.00

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CLERK OF STATE
CORPORATE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ALPHA AESTHETICS AND WELLNESS, 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:

JASON ~~KWIATOWSKI~~ Kwiatkowski

Name of Person

Firm/Company

11380 PROSPERITY FARMS ROAD, SUITE D 113

Address

PALM BEACH GARDENS, FL 33410

City/State and Zip Code

SL@PERRY-CPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JASON ~~KWIATOWSKI~~ Kwiatkowski

Name of Person

503
at (_____) _____
Area Code

473-6275

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

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

[illegible]

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(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.

Dated July 27, 2023

Signature of a member or authorized representative of a member

Jason Kwigtkowski

Typed or printed name of signee