L23000499750

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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: SEXY BOY	YZ. LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Aaron Pulver, CPA		<u>.</u>
		Name of Person	
	Pulver CPA, LLC	Firm ² Company	
		Tim Company	
	800 SE 4th Ave Ste 821	Address	
		Address	
	Hallandale Beach FL 3300		
	aaron@pulvercpa.com	City/State and Zip Code	
		to be used for future annual report noti	ification)
For further information e	oncerning this matter, please co	all:	יי
Aaron Pulver, CPA		at (786) 213-9473	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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		<u>Street Address:</u> Registration Se	ection
Registration S Division of C	Corporations	Division of Co	rporations
P.O. Box 632		The Centre of 7	Fallahassee ne Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEXY BOYZ, LLC		
(<u>Name of the Limited Liabi</u> (A Florid	ity Company as it now appears on our records.) In Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on 11/02/2023	and assigned
Florida document number 1.23000499750		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		,
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		name of the new-register
agent and/or the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
The state of the s	Enter Florida street address	1.
	, Florid	н
	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 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
MGR	Renew Skin Spa, Inc	1239 EAST NEWPORT CENTER DRIVE	□ Add
		STF. 106	≡ Remove
		DEERFIELD BEACH, FL 33442	□Change
MGR	Sophia Wroth	830 North Riverside Drive	■Add
		Pompano Beach, FL 33062	□Remove
			□ Change
MGR	AWA Holdings I, LLC	1239 EAST NEWPORT CENTER DRIVE	■Add
		STE 106	□Remove
		DEERFIELD BEACH, FL 33442	□Change
			□Remove
			□Change
			□Add
			□Remove
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fective date, if other than the date is listed, the date must be ote: If the date inserted in this block becament's effective date on the Dep	se specific and cannot be prior to date tk does not meet the applicable st			
record specifies a delayed effective is filed.	date, but not an effective time, at	12:01 a.m. on the earlie	r of: (b) The 90th day a	fter the
nted December 22nd	2023			
	11			
<u> </u>	m Run ignature of a member or authorized			