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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations				
41 I 185 B 42 4241		ORIDA LASER STUDIO LLO				
SUBJECT:		Name of Limited Liability Company				
The enclosed	l Articles of .	Amendment and fee(s) are subt	nitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		ERIKA PERUGORRIA				
			Name of Person			
		SOUTH FLORIDA LASEI	R STUDIO LLC			
			Firm/Company			
		2950 NE 5TH AVE				
			Address			
		BOCA RATON FL 33431				
			City/State and Zip Code			
		SOUTHFLORIDALASERS		-1		
For further i	nformation c	ti-mail address; (to oncerning this matter, please ca	o be used for future annual report notable:	otification)		
ERIKA PER	RUGORRIA		305 9223677			
	Name o	f Person	at () Area Code Dayt	ime Telephone Number		
Enclosed is	check for th	ne following amount:				
□ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Re Di	iling Addres gistration S vision of C D. Box 632	Section orporations	Street Address: Registration S Division of C The Centre of	orporations		
	llahassee, I			roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH FLORIDA LASER STUDIO LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{1/4/24}{2}$ and assigned Florida document number 1.24000012342 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation. "L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) رب Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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
MGR	AMBER TAYLOR	3245 NW 25TH TERRACE	
		BOCA RATON FL 33434	■Remove
			□Change
MGR	ERIKA PERUGORRIA	2950 NE 5TH AVE	= Add
		BOCA RATON FL 33431	□Remove
			□Change
			□Add
			□Remove
			□ Change
			🗖 Add
			□Remove
			☐ Change
			🗆 Add
			□Remove
			□Change
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			□ Change

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ffect	ive date, if other than the date of filing: 9/1/2024 (optional)
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
lote:	nent's effective date on the Department of State's records.
iote: ocum	rd 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
lote: ocun recor I is fi	rd 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 led. SEPTEMBER IST 2024.4
<u>Note:</u> locum	rd 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 led.

Filing Fee: \$25.00