L24000076303

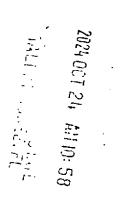
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J, Andrew Baldwin Victoria Cruz Laura H, Howard Trenton T, Leigh Alexa A, Rodriguez Sabrina E, Solomon Stanford R, Solomon Matthew E, Thatcher *

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October 21, 2024

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ROBIN SUMMERS

INFORMATION TECHNOLOGY WILLIAM F. KENT

FIRM ADMINISTRATOR JACQUELINE GLADE

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

REJUVENATION MEDICAL AESTHETICS BY DAISY LLC

Document Number L24000076303

Articles of Amendment to Articles of Organization

Dear Sir/Madam:

Enclosed is our firm's Check No. 0096, dated October 16, 2024, made payable to Florida Department of State, in the amount of \$25.00 as payment for the filing fee of the enclosed Articles of Amendment to the Articles of Organization of Rejuvenation Medical Aesthetics by Daisy LLC.

Please feel free to contact us our office, should you have any questions or need anything else regarding this filing.

Sincerely yours,

THE SOLOMON LAW GROUP, P.A.

Terry Thiele

Paralegal

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

REJUVEN SUBJECT:	SATION MEDICAL AESTHET	TICS BY DAISY LLC		
.30000011	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Stanford R. Solomon		_	
		Name of Person	 -	
	The Solomon Law Group,	P.A.		
		Firm/Company		
	1881 West Kennedy Bould	evard, Suite D		
		Address		
	Tampa, Florida 33606			
		City/State and Zip Code		
	agent@solomonlaw.com			
		to be used for future annual report no	tification)	
For further information	concerning this matter, please c	all:		
Stanford R. Solomon		813 225-1818 at ()		
Name	of Person	Area Code Daytii	ne 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 Addre		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REJUVENATION MEDICAL AESTHETICS BY DAISY LLC

(Name of the Limited Liability Compa (A Florida Limited)	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.24000076303	were filed on February 12, 2024 $\frac{1}{12} \frac{1}{12} \frac{1}{12} \frac{1}{12}$ and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1881 West Kennedy Boulevard	
(Principal office address MUST BE A STREET ADDRESS)	Suite D	
	Tampa, Florida 33606	
Enter new mailing address, if applicable:	1881 West Kennedy Boulevard	
(Mailing address MAY BE A POST OFFICE BOX)	Suite D	
	Tampa, Florida 33606	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	iddress on our records, <u>enter the name of the new registered</u>	
New Registered Office Address.	Enter Florida street address	
	Florida	
	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is	

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	Daisy Bazemore	1881 West Kennedy Boulevard	□Add
		Suite D	Remove
		Tampa, Florida 33606	≣ Change
MGR N	Martin E. Mancini	1881 West Kennedy Boulevard	□Add
		Suite D	□Remove
		Tampa, Florida 33606	
			□Remove
			□Change
			□ Add
			□Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			□Change

	
(If an e Note:	tive date, if other than the date of filing:
he reco	ord 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 illed.
Dated	$\frac{\text{October}}{\text{October}} = \frac{2l}{2l}$
	Stanfors Pobloman
	Signature of a member or authorized representative of a member
	Stanford R. Solomon

Filing Fee: \$25.00