

L25000028752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

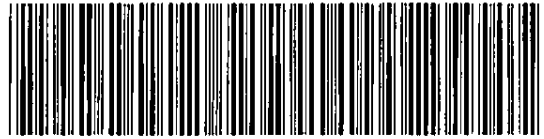
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/31/25--01022--026 **25.00

REC'D JAN 31 7:38
SEC. OF STATE
TALLAHASSEE FL

Handwritten signature
3/16/25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VITALMEDSPA 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:

YUSILEY MENDIETA

Name of Person

VITAL MEDSPA LLC

Firm/Company

601 N FEDERAL HWY, SUITE 301-38

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

jmendieta@vitalmedspa1.com

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

For further information concerning this matter, please call:

Jose Mendieta

630

292-0949

at ()

Name of Person

Area Code

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

RECEIVED
TALLAHASSEE, FL
JAN 31 11:33 AM

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VITAL MEDSPA 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 01/15/2025 and assigned
Florida document number 1.25000028752.

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.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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

Florida

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 Changing Registered Agent, Signature of New Registered Agent

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

SEC.	DATE	TIME	ATF
10-11-68			

E. Effective date, if other than the date of filing: 01/24/2025 (optional)

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 90th day after the record is filed.

Dated January 24, 2025

Signature of a member or authorized representative of a member

YUSILEY MENDIETA

Typed or printed name of signee

VITAL MEDSPA LLC
Business Meeting Minutes

Date: January 24, 2025

Time: 3:00 PM

Location: Vital Medspa LLC,
601 N. Federal Hwy. St 301-38, Hallandale Beach, FL 33009

Attendees:

- Yusiley Mendieta, Authorized Member
- Jose Mendieta, Authorized Member

Meeting Purpose: To document the ownership structure of VITAL MEDSPA LLC and address the addition of Jose Mendieta as a 50% owner and member of the company, and to provide sufficient proof for Wells Fargo to allow Jose Mendieta to open a business checking account and credit card for the business.

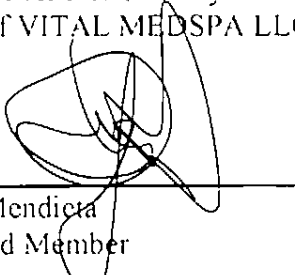
Minutes:

1. **Call to Order:** The meeting was called to order by Yusiley Mendieta at 3:00 PM.
2. **Acknowledgment of Current Ownership:** Yusiley Mendieta was acknowledged as the current AMBR (Authorized Member) and sole member of VITAL MEDSPA LLC as reflected on Sunbiz, the official business registry of the State of Florida.
3. **Addition of Jose Mendieta as 50% Owner and Authorized Member:** A motion was made by Yusiley Mendieta to add Jose Mendieta as a 50% owner and authorized member of VITAL MEDSPA LLC. The motion was seconded and unanimously approved by all attendees.
Resolution: Jose Mendieta is hereby recognized as a 50% owner and Authorized Member of VITAL MEDSPA LLC, effective January 24, 2025.
4. **Filing Amendment with the State of Florida:** It was noted that due to a filing error, Jose Mendieta's membership and ownership are not yet reflected on Sunbiz. An amendment has been filed with the State of Florida on January 24, 2025 to correct this error. Confirmation of the amendment filing will be provided upon processing by the State.
5. **Authorization for Wells Fargo Accounts:** The members agreed to authorize Jose Mendieta to open and manage the following accounts on behalf of VITAL MEDSPA LLC with Wells Fargo:
 - o Business checking account
 - o Business credit card**Resolution:** Wells Fargo is hereby authorized to recognize Jose Mendieta as a 50% owner and Authorized Member of VITAL MEDSPA LLC with full authority to open and manage business accounts, including a business checking account and credit card.
6. **Adjournment:** There being no further business, the meeting was adjourned at 3:30 PM.

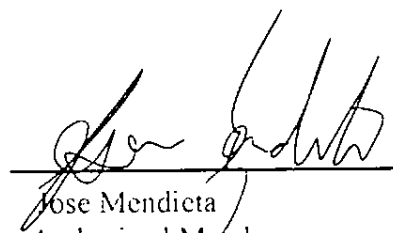
Certification:

I, Yusiley Mendieta, hereby certify that the above minutes accurately reflect the decisions made during the meeting of VITAL MEDSPA LLC held on January 24, 2025.

Signed:



Yusiley Mendieta
Authorized Member



Jose Mendieta
Authorized Member