

M230000000494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

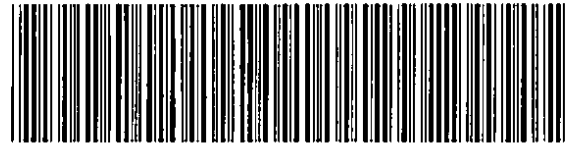
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01/18/24--01015--013 *\$25.00

FILED
2024 JAN 18 PM 3:16
CLERK OF SUPERIOR COURT
JANUARY 18 2024



ADVANCED MEDAESTHETIC PARTNERS

VIA USPS:

Florida Division of Corporations
Registration Section
PO Box 6327
Tallahassee, FL 32314

January 10, 2024

Re: Application to File Amendment for Foreign LLC: AMP East, LLC
Document #M23000000494

To Whom It May Concern,

This is a formal request to file an Amendment to the Certificate of Authority for the foreign entity AMP East, LLC, filed in Florida on January 13, 2023, for routine processing. Enclosed is the Application for Amendment and a check in the amount of \$25.00.

We were advised by department representative Corey, that we do not need to include a certificate evidencing the amendment due to the domestic state of incorporation, Delaware, not requiring an amendment to update officers/managers of an entity. The state of Delaware does not collect board information.

Please mail or email the approved filing to:
AMP East, LLC
ATTN: Hannah Ansari
1641 Abbottsford Ave.
Providence Village, TX 76227
legal@weramp.com

Please contact us at the email address mentioned below should you have any questions.

Regards,

Hannah Ansari

AMP EAST, LLC
3500 MAPLE AVENUE, #1600
DALLAS, TEXAS 75219
LEGAL@WERAMP.COM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMP East, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

AMP East, LLC

Firm/Company

3500 Maple Ave., #1600

Address

Dallas, TX 75219

City/State and Zip Code

legal@weramp.com

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

For further information concerning this matter, please call:

Hannah Ansari

at (214) 587-2187

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| ☒ \$25 Filing Fee | ☐ \$30 Filing Fee &
Certificate of Status | ☐ \$55 Filing Fee &
Certified Copy | ☐ \$60 Filing Fee.
Certificate of Status &
Certified Copy |
|---|---|--|--|

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: AMP East, LLC

Enter new principal office address, if applicable: _____

**(Principal office address
MUST BE A STREET ADDRESS)**

3500 Maple Ave., #1600

Dallas, TX 75219

Enter new mailing address, if applicable: _____

**(Mailing address
MAY BE A POST OFFICE BOX)**

3500 Maple Ave., #1600

Dallas, TX 75219

2. The Florida document number of this limited liability company is: M23000000494

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 01/13/2023

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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:

Thereby 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.

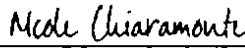
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Hunter Dallas	3500 Maple Ave., #1600	☐ Add
		Dallas, TX 75219	☒ Remove
President	Nicole Chiaramonte	3500 Maple Ave., #1600	☒ Add
		Dallas, TX 75219	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


 Signature of the authorized representative
 Nicole Chiaramonte
 Typed or printed name of signee

Filing Fee: \$25.00