

ELLED EFFEC **AMENDMENT TO** CERTIFICATE OF ORGANIZATION UN 17 AM 8: 42 LIMITED LIABILITY COMPANY SECRETARY OF STATE

	(Instruction	ons on back of application)	STATE OF IDAHO	
1.	The name of the limited	l liability company is:		
	At Your Service	Nails & Beauty Supp	olies, LLC	
2.	The date the certificate	of organization was filed was:	02/25/2010	
3.	The complete street an amended to:	d mailing addresses of the des	signated principal office is	
	(Remain the san	ne as original filing.)		- -
4.	The mailing address for	r future correspondence (annua	al reports) is amended to:	
	[Remain the san	ne as original filing.)		,
5 .	The name of the limited	l liability company is amended t	to read:	
	(Remain the so	ane as #1)		
6.	The name and address of the managers/members shall be amended as follows:			
O.	The name and address	or the managers/members sha	all be amended as follows:	
0.	Name	Address	Delete Other	
	<u>Name</u>	- -	Delete Other	:2000 (c)
7.	Name Roberta Perry Wellma Gary Paul Wells Gignature of an authoriz	Address Wer-Wels, 934 Alder St. Sandpoint, ID 83864 124 Alder St., Sandpoint, ID 83864 ted person.	Delete Other	:20m;
7.	Name Roberta Perry Wellma Gary Paul Wells Gignature of an authoriz	Address Wer-Wels, 934 Alder St. Sandpoint, ID 83864 124 Alder St., Sandpoint, ID 83864 ted person.	Delete Other	ian o)
7. Sigh	Name Roberta Perry Wellma Gary Paul Wells G	Address Mer-Wels, 924 Alder St. Sandpoint, ID 83864 124 Alder St., Sandpoint, ID 83864 ted person.	Delete Other	(2000)
7. Sight Type Signs Gae	Name Roberta Perry Wellma Grary Paul Wells Signature of an authoriz Authorize Serry Wellmaker given Authorize Berta Perry Wellmaker given Authorize Authorize	Address Wer-Wels, 934 Alder St. Sandpoint, ID 83864 124 Alder St., Sandpoint, ID 83864 ted person.	Delete Other Delete Other Owver Remain the si Husband Owne	2 m