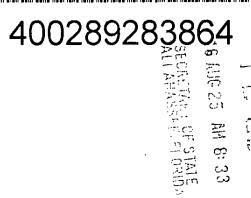
## L160000100A81

	(Re	questor's Name)	
	(Ad	dress)	
	(Ad	dress)	
	(Cit	y/State/Zip/Phone	e #)
PIC	CK-UP	WAIT	MAIL
470.22m	(Riv	siness Entity Nar	ne)
	(00	Sine 35 Entity (4a)	(10)
	//5	. N	· ·
	(D0	cument Number)	
Certified Copies	·	_ Certificates	of Status
Special Instru	ctions to	Filing Officer:	,
			į
l .			

Office Use Only





08/25/16--01013--017 \*\*25.00

J. HARRIS

## CORPORATE ACCESS, \_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## WALK IN

WALKIN					
		PICK UP: 825			
		CERTIFIED COPY			
	Ø	РНОТОСОРУ			
		CUS			
	Ø	FILING Amendment			
1.		ELEGANT STYLE NAIL SALON, LLC (CORPORATE NAME AND DOCUMENT #)			
2.		(CORPORATE NAME AND DOCUMENT #)			
3.		(CORPORATE NAME AND DOGUMENT II)			
4.		(CORPORATE NAME AND DOCUMENT #)			
5.		(CORPORATE NAME AND DOCUMENT #)			
		(CORPORATE NAME AND DOCUMENT #)			
6.		(CORPORATE NAME AND DOCUMENT #)			
	ECIA STRU	L CTIONS:			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELEGANT STYLE NAIL SALON, LLC		
(Name of the Limited Liability Compa (A Florida Limited I.	ny as it now annears on our rec liability Company)	ords,)
The Articles of Organization for this Limited Liability Company Florida document number 1.16000100481	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "I	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		50 m
(Principal office address MUST BE A STREET ADDRESS)		
		9750 UT
Enter new mailing address, if applicable:		ing 3 (ii)
(Mailing address MAY BE A POST OFFICE BOX)		- FS 8
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		•
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
		Florida
New Dealer and A court offer any 16th of the Dealer and	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as a being filed to merely reflect a change in the registered office.	performance of my duties provided for in Chapter 60 address, I hereby confirm	, and I am familiar with and 05, 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>	Address	Type of Action
AR	Jeff Novatt	1415 Panther Lane, Suite 327	Add
		Naples, FL 34109	Remove
			☐ Change
			D Add
			□ Remove
			Change
			Add
			□ Remove
			☐ Change
<del></del>			🖸 Add
			☐ Remove
			☐ Change
			Add — S — Add — Add — S — Add — Ad
			Add 5 Add 7 S Add 7 S Add 7 S S Add 7 S S Add 3 3 Add 7 S S Add 7 D Ad
			□ Remove
			☐ Change

		Page 3 of 3 Filing Fee: \$25.00	FOR	AH 6: 33
		Typed or printed name of signee		25
	Jeff Novart, Authorized Rep	·		
	- Sign	nature of a member or authorized representative of a member	DØ.	Ö,
Jaieu				
he reco	Oth day after the record	fective date, but not an effective time, at 12	:01 a.m. on the ear	tier o
Note: If	the date inserted in this block of	e of filing: specific and cannot be prior to date of filing or more than 90 day does not meet the applicable statutory filing requiremen	(optional) s after filing.) Pursuant to 6 ts. this date will not be li	i05,0207 ( isted as t
				_
				natural.