## L22000005254

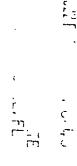
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTÉR**

TO:	Registration Se Division of Cor					
SUBJEC		BY JADIE LLC				
.уоты г.х	· · ·	Name of Lim	ited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please re	aurn all correspo	ondence concerning this matter	to the following:			
		CARLOS PEREZ				
			Name of Person			
		CPERFZ PROFESSIONA	L SERVICES INC			
			Firm/Company			
		4343 W WATAERS AVE				
			Address			
		TAMPA FL 33614				
		CPEREZPROSVCSINC@	City/State and Zip Code			
			to be used for future animal report notels	cation)		
For furt	ner information c	concerning this matter, please ca	all:			
CARLOS PERFZ			813 249-2300 at ()			
	Name o	n Person	Area Code Daytime	Felephone Number		
Enclosed	d is a check for t	he following amount:				
<b>■</b> \$25.	.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy (senciosed)	☐ Sisti_O() Liling Lee. Certificate of Status & Certified Copy tadditional copy is inclosed.		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Fullahassee, FT 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAKEUP BY JADIE LLC		- Land
(Name of the Limited Liabil) (A Florid:	ity Company as it now appears on our re a Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C Florida document number 1.22000005254	Company were filed on 12.28.2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
MAKEUP BY JADIE LLC		
The new name must be distinguishable and contain the words "I in	nited Liability Company," the designation	TTC or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
B. If amending the registered agent and/or registered agent and/or the new registered office ado		ords, enter the name of the new
registered agent and/or the new registered office add	iress here.	
Name of New Registered Agent:		
New Registered Office Address:		
	Litter Elorida street o	htees
		. Florida
	CH):	, Florida

## 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, it 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JADIRA M DE JESUS	4802 ALVARADO DR TAMPA, FL 33634	■ \dd
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			C Change
			D Add
			B Remove
			☐ Change
			D \dd
			□ Remove
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ran en Note:	If the date inserted in this b	st be specific and lock does not r	t cannot be pri- neet the ann!	or to date of filing leable statutory	or mow than 90 c filing reauirems	lays after filing ) Pr ents (this date yer	usuum to 605,0207 H not be listed as
docum	ient's effective date on the I	Department of S	state's record	s.	3 - 1		
e rec	cord specifies a delaye	d effective (	date, but n	ot an effecti	ve time, at 1	2:01 a.m. on	the earlier of
The	90th day after the red	ord is filed.			•		
Dated	JANUARY 13		2022				
		A					
			N)				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00