## L22000054462

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
au AS
Q. SILAS APR 1 4 2022
M16/22 :

Office Use Only



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04/11/22--01059--001 \*\*\$0.00

2027 APR -6 PM 5: 30 SECRETARY OF STATE



RECEIVED

2022 APR -6 PM 12: 06

### FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETAR FE TALLAHA AME

Letter Number: 422A00007078

March 25, 2022

LETICIA ANNETT 10110 SWEET BAY ST PLANTATION, FL 33324

SUBJECT: LETTY'S UNISEX BEAUTY BAR, LLC

Ref. Number: L22000054462

We have received your document for LETTY'S UNISEX BEAUTY BAR, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas Regulatory Specialist II

www.sunbiz.org

#### **COVER LETTER**

36

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TO: Registration Section Division of Corporations					RECEIVED
	Letty's Unis	ex Beauty Bar, LLC	2022 HAR 10		
SUBJECT:		Name of Limi	SECRETARY STATE TALLAHASSEE FL		
The enclosed	l Articles of a	Amendment and fee(s) are sub-	mitted for filing.		7.5.7.
Please return	all correspo	ndence concerning this matter	to the following:		
		Leticia Annett			
			Name of Person		
			Firm/Company		
		10110 Sweet Bay St	Tutte Company		
		<del></del>	Address		<del></del>
Plantation, Fl. 33324					
City/State and Zip Code					
		E-mail address: (t	o be used for future annua	il report notification	on)
For further in	nformation co	oncerning this matter, please co	ill:		
Leticia Anne	ett		954 4 at ()	10-1860	
Name of Person		Area Code	Daytime Tele	ephone Number	
Enclosed is a	check for th	e following amount:			
□ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is ea		■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mai</u>	ling Address	<u>s.</u> antinu		Address:	
Registration Section Division of Corporations P.O. Box 6327			<del>-</del>	ration Sectior on of Corpora	
			The Co		

Tallahassee, FL 32314

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2022 APR -6 PM 5: 36

Letty's Unisex Beauty Bar, LLC

(Name of the Limited Liability Company as it now appears on our records HASSEF, FL

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	ompany were filed on 02/01/2022	and assigned
Florida document number 1.22000054462		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
Letty's World Travel & Tours, LLC		
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR		
		_
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	office address on our records, enter	r the name of the new registered
agent and/or the new registered office address here:		
Norma of Nove Declared A		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	25.5
		lorida
	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 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
			□Add
			Remove
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	3/16/2022			
Iffective date, if other than the an effective date is listed, the date mus Note: If the date inserted in this blocument's effective date on the Do	ock does not meet the appl	or to date of filing or more icable statutory filing re	(optional) than 90 days after filing.) Pursuar equirements, this date will not	nt to 605.020 be listed as
record specifies a delayed effective d is filed.	e date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 90th d	ay after the
March 11	2022			
Notael .	•	<del></del> ·		
Dated				
Dated	Sold C	ed		

Filing Fee: \$25.00