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## #LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE BEAUTY BAR BY ELLIE BELLE, PLLC

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K. SALY

JUL - 2 2024

From: Rajiv Srivastava

## **COVER LETTER**

TO;	Registration Solivision of Co			
e1:0107		UTY BAR BY ELLIE BELLE	. PLLC	
SUBJEC		Name of Lin	ited Liability Company	
			·	
		Mike Town		
		****	Name of Petson	***************************************
		Legalzoom.com, Inc		
			Firm/Company	
	THE BEAUTY BAR BY ELLIE BELLE, PLLC  Name of Limited Liability Company  closed Articles of Amendment and fee(s) are submitted for filing.  return all correspondence concerning this matter to the following:  Mike Town  Name of Person  Legalzoom.com, Inc  Firm/Company  9900 Spectrum Dr  Address  Austin, TX 78717  City/State and Zip Code  TheBerMobilet/Hydration(@gmail.com)  E-mail address: (to be used for future annual report notification)  her information concerning this matter, please call:			
		<del></del>	Address	····
		Austin, TX 78717		
		•	(d)gmail.com	
		li-mail address; (	to be used for future annual report notif	ication)
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Мікс То	own		800 773-0888	
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Τo:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



THE BEAUTY BAR BY ELLIE BELLE, PLLC		
(Same of the Limited Liability Comps (A Florida Limited	ns as it now appears on our record Liability Company)	2.1
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000064018</u>	were filed on 02/03/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
The Bar Aesthetics & Wellness PLLC		
The new mane must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3564 East Colonial Dr. #17	
Principal office address MUST BE A STREET ADDRESS)	Ortando, FL 32803	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		s, enter the name of the
Name of New Registered Agent:		turna applia ikin same f tapa an man tingka kilangan nem gama and an
New Registered Office Address:	Enter Florida street (aldres:	y
<del></del>	, Flo	oridaZip 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

To:

MGR = Manager

AMBR = Authorized Member			
Title	Name	Address	Type of Action
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			☐ Kemove
			□ Change
	TO THE OWNER OF THE THE SPECIAL PROPERTY OF THE PROPERTY OF TH		Change  Remove
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		ann agasta agas muna popularismos e kall e l'Alfre kalikan e la man estiladorna en call agasta ma muna,	□ Add
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□ Change

To:

. Han	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Silver of
Note;	tive date, if other than the date of filing:  [Coptional]  [Receive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3:0)  [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	1 - NOVE N
	$\frac{1}{2}$
	Signature of a thember or authorized representative of a member
	Elena Vale-Saquieres

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Filing Fee: \$25.00