# L23000226538

(Requestor's Name)
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PICK-UP WAIT MAIL
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## **COVER LETTER**

то:	Registration Se Division of Cor		•	•
SUBJE		REEN SALON LLC		
50 DJ1.	C1	Name of Lim	nited Liability Company	
		Amendment and fee(s) are sub		
		Azlina Goldstein		
			Name of Person	
		SURI&NOREEN LLC		
			Firm/Company	
		1811 West Community Dr	ive	
			Address	<del></del>
		Jupiter, FL 33458		
		suriandnoreen@gmail.com	City/State and Zip Code	<del></del>
			to be used for future annual report notif	ication)
For furtl	ner information co	oncerning this matter, please c	all:	
Azlina (	Goldstein		954 559-0465	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
■ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		L			
2023 JUN	29	₽Ħ	<b> </b> :	1.	/

Zip Code

SURI&NOREEN SALON LLC	1.1	1
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.): (( / - Company)	
The Articles of Organization for this Limited Liability Company were for document number <u>L23000226538</u> .	Tled on 05/08/2023 and assign	ned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability co	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Com	ppany," the designation "LLC" or the abbreviation "L.L.C	7 11
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<b>-</b> -
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
<del></del> -	<u> </u>	
3. If amending the registered agent and/or registered office addres agent and/or the new registered office address here:	s on our records, <u>enter the name of the new r</u>	<u>egist</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	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, 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.

City

'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>	Name	Address	Type of Action
MGR	ALICIA NOREEN HAIR LLC	6423 SE LOCKERBY PLACE	□ Add
		HOBE SOUND, FL 33455	
			□Change
			□Add
			□Remove
			☐ Change
			□Add
		<u></u>	□Remove
			Change
		<del></del>	□Add
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Effective date, if other than the date of filing:  05/08/2023  (optional)  If an effective 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 605.020 Mote: If the date inserted in this block does not meet the applicable statutory tiling requirements, this date will not be listed as document's effective date on the Department of State's records.  e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the rd is filed.  Dated  JUNE 28  2023  ALAGAM  Signature of a member or authorized representative of a member					
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Signature of a member or authorized representative of a member					
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	Azlina Goldstein				

Filing Fee: \$25.00