

**L07000049756**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**L. SELLERS**

SEP -1 2011

To: Division of Corporations  
Fax Number : (850) 617-6383

**EXAMINER**

From: Account Name : EAGLE TAX REPRESENTATION, CORP.  
Account Number : I20070000037  
Phone : (954) 752-4553  
Fax Number : (954) 752-4522

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BRAZILIAN SALON LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED

11 AUG 31 PM 1:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

11 AUG 30 AM 9:18

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BRAZILIAN SALON LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**VAGNELI ARAUJO COSTA**  
Name of Person

**EAGLE TAX REPRESENTATION, CORP**  
Firm/Company

**4641 N STATE ROAD 7 - STE 18**  
Address

**COCONUT CREEK, FL - 33073**  
City/State and Zip Code

**PAULO@EAGLE-TAX.COM**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Paulo Oliveira, E.A.** at ( **954** ) **752-4553**  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**FILED**  
**11 AUG 30 AM 9:18**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

BRAZILIAN SALON LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/09/2007 and assigned  
Florida document number L07000049756

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

Florida

*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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Vagneli Honorio	4400 W Hillsboro Blvd Coconut Creek, FL - 33073	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Vagneli Araujo Costa	4400 W Hillsboro Blvd Coconut Creek, FL - 33073	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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Dated August 31st, 2011

*Vagneli Araujo Costa*

Signature of a member or authorized representative of a member

Vagneli Araujo Costa

Typed or printed name of signee