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J. Shibers NOV 2 0 2014

# COVER LETTER "

TO: Registration Section Division of Corporations
SUBJECT: A, K, A. Innovative Hair Studio, LL 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:
Alexys Oyer Name of Person
Firm/Company
479. E. Maine Ave
Longwood FL 32750
City/State and Zip Code
For further information concerning this matter, please call:
Alexys Oyer 1, 407, 739-0596
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Sta

#### MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tailahassee, FL 32314

#### STREET/COURIER ADDRESS:

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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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 Nov. 5, 20/ Florida document number 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 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

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member **Type of Action** Title Title <u>Name</u> **Address** □ Add ☐ Remove □ Add □ Remove □ Add □ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (optional)  (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Department of State)  Dated //-/2-/4
Dallet The Control of
Signature of a member or authorized representative of a member
Typed or printed name of signee
J 3
i <del>tri</del> i
Page 3 of 3
Filing Fee: \$25.00
Changing name of LLC, and Removered mager kay Parker because She backed
De la bassilla St.
Mnger Kay Parker because She backed
out of deal.
Alexys Oyu
11-12-14 #114000171490
11-12-14 #L14000171490