

L05000103244

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Name Change on NANCY'S HAIR STYLIST, LLC

(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

JUAN SANTAELLA

(Name of Person)

PASAN INVESTMENT, INC.

(Firm/Company)

2310 W WATERS AV STE D

(Address)

TAMPA FL 33604-2757

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN SANTAELLA

(Name of Person)

at (813) 849-2878

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
NANCY'S Hair Stylist, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

At the time of Organization the Operator indicates

NANCY'S HAIR STYLIST, LLC as the name of the business but the

correct is NANCY'S BEAUTY SALON, LLC

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: OCT 21 2005

Signature of a member or authorized representative of a member

JUAN SARDUENA

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 OCT 24 P 1:54

FILED

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L05000103244
FILED 8:00 AM
October 19, 2005
Sec. Of State
mthomas

Article I

The name of the Limited Liability Company is:

NANCY'S HAIR STYLIST, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

2917 W WATERS AV
TAMPA, FL. US 33614

The mailing address of the Limited Liability Company is:

2917 W WATERS AV
TAMPA, FL. US 33614

Article III

The purpose for which this Limited Liability Company is organized is:

HAIR SALON AND ANY LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

NANCY A MARTINEZ
8307 CLERMONT ST
TAMPA, FL. 33637

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: NANCY MARTINEZ

Article V

The name and address of managing members/managers are:

Title: MGRM
NANCY MARTINEZ
8307 CLEARMONT ST
TAMPA, FL. 33637 US

Signature of member or an authorized representative of a member

Signature: JUAN SANTAELLA

L05000103244
FILED 8:00 AM
October 19, 2005
Sec. Of State
mthomas