

LO6000040536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

606A00037083

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ENTRE NOUS HAIR STUDIO, LLC.

(Name of Limited Liability Company)

Doc. # 206000040536

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:

VICTORIA E. GOMEZ

(Name of Person)

HAIR BY VICKY CORP.

(Firm/Company)

6808 HATTERAS DR.

(Address)

LAKE WORTH, FL 33467

(City/State and Zip Code)

For further information concerning this matter, please call:

VICTORIA E. GOMEZ

(Name of Person)

at (561) 255-9065

(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

CR2E062 (08/05)

**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:
ENTRE NOUS ~~HAIR~~ ^{CARE} STUDIO, LLC. # L06000040536

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:
ARTICLE II. THE ADDRESS AND MAILING ADDRESSES OF THE COMPANY HAVE BEEN CHANGED.

THE NEW ADDRESS AND THE NEW MAILING ADDRESS SHOULD READ:

170 E. BOCA RATON RD., UNIT 6

BOCA RATON, FL 33432

OR

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

Dated: _____

Victoria G. Cortes

Signature of a member or authorized representative of a member

VICTORIA G. CORTES

Typed or printed name of signee

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

06 MAY 18 PM 12:01

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS