

207000045201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

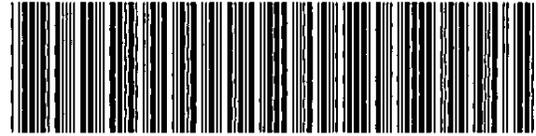
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EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRASMITTAL LETTER

THIS LETTER IS TO BE ACOMPANIED BY \$35.00 FOR A STAMPED COPY OF THE ARTICLES TO BE MAILED TO:

**EZEQUIEL AMADOR
10633 JONATHAN DR
ORLANDO, FL 32825**

THANK YOU

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Articles of Amendment
To
Articles of Organization
Of
LISCHRI, LLC
L07000045201

FIRST: The Articles of Organization were filed on April 1, 2008.

SECOND: This amendment is submitted to amend the following:

ARTICLE I

The name of the Limited Liability Company is:

SANDRA'S BEAUTY SALON, LLC

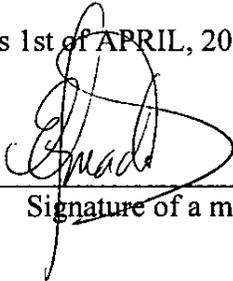
ARTICLE IV

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

EZEQUIEL AMADOR
10633 JONATHAN DR
ORLANDO, FL 32825

Signed this 1st of APRIL, 2007.

Signature:



Signature of a member or authorized representative of a member.

OR

(By a manager if adopted by managers)

EZEQUIEL AMADOR

Typed or printed name

MANAGER

Title

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**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/ REGISTERED OFFICER**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 FLORIDA
STATUS, THE UNDERSIGNED CORPORATION ORGANIZED UNDER
THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICER/ REGISTER AGENT, IN THE STATE OF FLORIDA.

1-) THE NAME OF THE CORPORATION IS:

SANDRA'S BEAUTY SALON, LLC

2-) THE NAME AND ADDRESS OF THE REGISTER AGENT/OFFICER
IS:

**EZEQUIEL AMADOR
10633 JONATHAN DR
ORLANDO, FL 32825**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT
SERVICES OF PROCESS FOR THE ABOVE STATED CORPORATION
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
STATUES 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.

Ezequiel Amador


Signature

4/1/08
Date