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DEC 14 2009

EXAMINER

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TT

TO: Registration Section Division of Corporations	
SUBJECT: JAKING AFRICAN BRAIDIN Name of Limited Liability Company	GAND STYPING
Please return all correspondence concerning this matter to the following:	
FATOU KINE NDIAYE	
JAKIN'S AFRICAN HOUSE BOAIDING	AND Styling LLC
7559 WORKLAND PARKE	LVD
TAMARAC FL 33319 City/State and Zip Code	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	
FATOU KINE NDIAYE at 347, 432 9554 Name of Person Area Code & Daytime Telephone	Number
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy (additional copy is enclosed)	0.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
Registration Section Registration Section Division of Corporations Division of Corporations	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAKIN'S AFRICAN HAIR I (Name of the Limited Liability Comparing) (A Florida Limited L	BRAIDING And Styling LL iv as it now appears on our records. Styling LL is ability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 10800042710	were filed on 1 128 1 58 and assigned	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabi	LCAN S	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	7559 W Oakland Park BLVD TAMARAC FL 33319	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7559 Woakland Park BLVD Tamanac FL 33319	
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: FATOU New Registered Office Address: 7559 4	KINE H'DIAYE 2 Ockland Park BLVD Enter Florida street address	
TAMAR	Ac FL , Florida 333 19 City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		

If Changing Registered Agent, Signature of New Registered Agent

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 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 Type of Action Title <u>Name</u> Address FATOLIKINE N'DIAYE 7559 W Oakland Park MAD MORM ☐ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Tames Baown
Typed or printed name of signee

Filing Fee: \$25.00