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SECRETARY OF STATE DIVISION OF COMPENSATION

COVER LETTER

	egistration S ivision of Co			
SUBJECT	`	Salon	Ser Vien LLC	
		Name of Limi	ited Liability Company	·
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retur	rn all co rre sp	ondence concerning this matter	to the following:	
			lizabeth Freudenberg	
			Name of Person	
			Salon Ser Vien LLC	
			Firm/Company	
		1767 L	akewood Ranch Blvd #122	
		,	Address	
		<u> </u>	adenton Florida 34211	
		•	City/State and Zip Code	
		E-mail address: (i	fo@salonservien.com to be used for future annual report notific	cation)
For further	information	concerning this matter, please c	eall:	
		er Freudenberg	at \	708-3405
	Name	of Person ·	Area Code & Daytime	Telephone Number
Enclosed is	s a check for t	the following amount:		
\$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist	LING ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpora	ı

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Salon Ser	Vien LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appear liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company		5/2/08	and assigned
Florida document number L08000044149			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company hero	;·	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Compar	ny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			SEC
(Principal office address MUST BE A STREET ADDRESS)			
			<u> </u>
			P 125
Enter new mailing address, if applicable:	<u> </u>		2: -:
(Mailing address MAY BE A POST OFFICE BOX)	,	· · · · · · · · · · · · · · · · · · ·	& ⊼
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B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	er Florida street ad	dress
		, Florida	2. 2.
	City		Zip Code

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 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Title **Name Address Type of Action** MGRM. Markus Freudenberg 1767 Lakewood Ranch Blvd #122 ✓ Add Bradenton Florida 34211 Remove MGRM Rebecca Freudenberg 1767 Lakewood Ranch Blvd #122 **√** Add Bradenton Florida 34211 Remove Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated	5/19 , 2009 .	
_	Signature of a member of authorized representative of a member	
_	Peter Freudenberg	
	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00