## L08000106944

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12 SEP -4 PH 4: 57

B. BOSTICK
SEP - 5 2012
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: HAIR STOCIO A HAIR DESIGN LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICHEUE TRAVIS
FIAR STUDIO OF HOLD DESIGN, LLC
6745 BUFF MCADOW CT
City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  Veriform. Not
For further information concerning this matter, please call:
MCHELLE TOPVIS  at (8B 765-1695  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:  \$\frac{\pmathrm{47.50}}{\pms52.50}\$
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ Certificate of Status \$\text{Certified Copy} \\ (additional copy is enclosed)\$\$ Certified Copy \\ (additional copy is enclosed)\$\$ Certified Copy \\ (additional copy is enclosed)\$\$

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF		177
(Name of the Limited Liability Company (A Florida Limited Lia	HALL DESIGN UC y as it now appears on our records.) ability Company)	PA F: 57
The Articles of Organization for this Limited Liability Company v Florida document number <u>LD8000106944</u>	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil  The new name must be distinguishable and end with the words "Limited"		LC" or the abbreviation
"L.L.C."  Enter new principal offices address, if applicable:	2032 AbHZEY 00	KS CIPCLE
(Principal office address MUST BE A STREET ADDRESS)	wesley ottopes	33544
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	6745 BLUFF M Wesley CHAPE	1.400W CT 1.FC 33545
B. If amending the registered agent and/or registered office address here		he name of the new
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street addi	ress
	, Florida	7in Coda

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</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

	- Manager I = Managing Member	·	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MOP	DISEPH D. TRAVIS	6745 BLUFF MEADOWCT WESLEY CHAPEL, FL 33545	Add Remove
<del></del>	<del></del>		☐ Add ☐ Remove
			Add Remove
, <del></del>			Add Remove
			Add Remove
			Add Remove
D. If a	mending any other information, enter changed PLOASE Add JOSEPH SHAROHOLDER FOR ASSF DUNE 1ST, 7	(s) here: (Attach additional sheets, if necessary.)  DTRAVISTIE AS A  1070 OF OWNERShy  2012	_ 2 _
Dated _	Signature of a member of MICHPILP	or authorized representative of a member	12 SEP - 4 PH 4
		or printed name of signee	1 1 1 57 T

Page 2 of 2

Filing Fee: \$25.00



August 15, 2012

MICHELLE TRAVIS FLAIR STUDIO OF HAIR DESIGN, LLC 6745 BLUFF MEADOW COURT WESLEY CHAPEL, FL 33545

SUBJECT: FLAIR STUDIO OF HAIR DESIGN, LLC

Ref. Number: L08000106944

We have received your document for FLAIR STUDIO OF HAIR DESIGN, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 912A00021032

Barbara Bostick Regulatory Specialist II

www.sunbiz.org