L09000015826

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DIVISION OF CORPORATION

C. LEWIS
FEB 1 3 2013
EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

GENÉRATIONS A HAIR SALON 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:

	ANTHONY (GUTILLA	
		Name of Person	
		Firm/Company	
	2784 S. OCE	EAN BLVD S105	
		Address	
	PALM BEAC	CH. FL 33480	·
	ANTFG01@HOT	City/State and Zip Code MAIL.COM	
For further information c	E-mail address: (to	o be used for future annual report notificat	on)
Name o	f Person	at () Area Code & Daytime Te	elephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■\$60.00 Filing Fee, Certificate of Status & 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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2013 FEB 12 AM 11: 46

GENERATIONS A HAIR			
(Name of the Limite	d Liability Company as it now appe A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited I	Liability Company were filed on Fl	EB 16 2009 and assigned	
Florida document number L09000015826	 .		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company he	ere:	
The new name must be distinguishable and end w 'L.L.C."	ith the words "Limited Liability Comp	pany," the designation "LLC" or the abbreviation	
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	BOX)	*	
	-		
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter the name of the new	
Name of New Registered Agent:	ANTHONY GUTILLA		
New Registered Office Address:	2784 S. OCEAN BLVD S105		
•	E	nter Florida street address	
·	PALM BEACH, FL	, Florida 33480	
	City	7in 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: FILED SECRETARY OF STATE DIVISION OF CORPORATIONS MGR = Manager MGRM = Managing Member 2013 FEB 12 AM 11: 46 **Title** Address **Type of Action** Name 12466 QUERCUS LANE MONICA HOFFMAN MGR WELLINGTON, FL 33414 2784 S. OCEAN BLVD. MGR **ANTHONY GUTILLA #2** PALM BEACH, FL 33480 Remove 9505 MINORCA WAY KASEY GUTILLA MGR APT 208, PALM BEACH Remove **GARDENS**, 33418 Remove Remove Remove

ing any other information, enter change(s) here: (A	
	2013 FEB 1 2
MANDE	
Signature of a member or authorized	representative of a member

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Filing Fee: \$25.00