

L11 0006 19582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

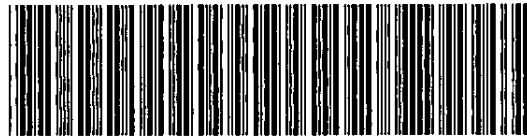
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APR - 2 2012

EXAMINER



300225141423

03/29/12--01036--005 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 29 10 4: 01

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 29 PM 4: 02

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Smooches Hair Studio and Nail Bar
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:

Phitina Mahone-Davis/ Shalonda Brown-Walker

Name of Person

Smooches Hair Studio

Firm/Company

P.O. Box 62134

Address

Jacksonville, FL 32208

City/State and Zip Code

smoocheshairstudio@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shalonda Brown-Walker

Name of Person

at (904)

887-0700

Area Code & Daytime Telephone Number

Enclosed is a check for the 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

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
12 MAR 29 PM 4:02

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Smooches Hair Studio and Nail Bar

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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DIVISION OF CORPORATIONS
12 MAR 29 PM 4:02

The Articles of Organization for this Limited Liability Company were filed on 2/15/2011 and assigned
Florida document number L11000019582.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Smooches Hair Studio LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8110 Lem turner Road

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, FL 32208

Enter new mailing address, if applicable:

P.O. Box 62134

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, FL 32208

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:

New Registered Office Address:

Enter Florida street address

, Florida

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

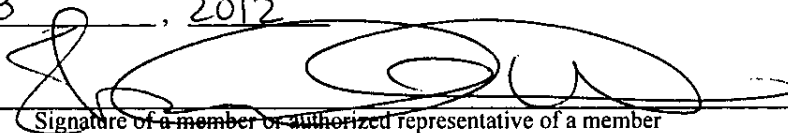
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGMR	Phitina Mahone-Davis	8922 Ribault Ave Jacksonville, FL 32208	☒ Add ☐ Remove
MGMR	Tiffanie Turner	8922 Ribault Ave Jacksonville, FL 32208	☒ Add ☐ Remove
MGMR	Jalaal Davis	8922 Ribault Ave Jacksonville, FL 32208	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated March 28, 2012



Signature of a member or authorized representative of a member

Shalonda Brown-Walker

Typed or printed name of signee