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(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE

C. LEWIS

MAR 2 2 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT: HAIR Signs by Taye LC Name of Limited Liability Company	
The e	aclosed Articles of Amendment and fee(s) are submitted for filing.	
Pleas	return all correspondence concerning this matter to the following:	
	TAYESHA FOGARTY - PIERLE Name of Person	
	Hair Dosigns by Taye LLC	
	935 SW 122nd Ave	
	Pembeoke Pines, H. 33025 City/State and Zip Code	
	hairdesignby taye a hotmail. com E-mail address: (to be used for future annual report notification)	
For fi	rther information concerning this matter, please call:	
11	Name of Person Area Code & Daytime Telephone Number	
Enclo	sed is a check for the following amount:	
₽3s2	5.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)	d)

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

HAIR Lesign by TAME LIE

FILED 12 MAR 21 PM 12: 44

SECRETARY OF STATE TALLAMASSEE, FLORIDA

Zip Code

(Name of the Limited Liability Company's it now appears on our records.) (A Florida Limited Liability Company)							
The Articles of Organization for this Limited Liability Company were filed on $02-23-20/2$ and assigned Florida document number $L/2000016382$.							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited liabi	ility company here:						
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation						
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET ADDRESS)							
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)							
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, enter the name of the new						
Name of New Registered Agent:							
New Registered Office Address:	Enter Florida street address						
	, Florida						

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.

City

MCLR Tayesha Tagarty-Rece 935 SW 122nd Ave Ramo MCLR Adrian Fogo 5995 Sucance Dr. Add Lake worth H, 23449 Remo MCLRM Adrian Fogo 5995 Sucance Dr. Radd Lake worth H, 23449 Remo MCLRM Tayesha Fogarty-Ricket 935 SW 122nd Ave Processory Add Remo D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	MGRM = Managing Member						
MGRM Adrian Fogo 5995 Surango Dr. Add Are worth H. 33449 Remo	<u>Title</u>	<u>Name</u>	Address	Type of Action			
MCIRM Addian Fogo 5795 Supango Se. Add Remo MCIM Tayesha Fogarty-Pierre 955 SW 120nd Aug. Add Remo Add Remo D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Mach 13 , 2012	MGR	TAyesha Togarty-Prese	935 SW 122nd Ave Pembeoke Pins, H. Boss	Add Remove			
Dated March 13 , 2012. Add March 1998 And Page Add March Add	MGR	Adrian Fogo	5995 JULANGO DE LAKEWORTS H, 33449	Add Remove			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Harch 13 , 2012	MGRM	Adrian Togo	5995 SURANGO DR. CARCURETTO : TH. 33449	Add Remove			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 13 , 2012	NGRM	TAYESHA FOGARHY-PICKEE	935 SW 122nd Ave Pembeoke Pines, 41.33025	Add Remove			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Harch 13, 2012.				Add Remove			
	D. If ame	nding any other information, enter change	(s) here: (Attach additional sheets, if necessary.,	Remove			
	-						
	-						
Signature of a member or authorized representative of a member	Dated						
Toyes to Togard Reme 0 12 12 12 12 12 12 12 12 12 12 12 12 12		Signature of a member of	or authorized representative of a member Oga-Li De Me or printed name of signee	ED			

MGR = Manager

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Filing Fee: \$25.00