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COVER LETTER

	tration Section on of Corporations				•	
SUBJECT: _	Sayblee	Handmade	Natura	l Hair Ca	re LLC	
		Name of Limited Liab	lity Company			
	l correspondence con	and fee(s) are submitted for α and the formula α and α are submitted for α and α and α are submitted for α	llowing:	eboK		
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		Miami IFL	33138		— 5 	100 mm
		Sebok. a Sh E-mail address: (to be used	eyagma for future amual rej	il · Com		, [[]
For further info	rmation concerning th	is matter, please call:			: ` Ç	כ
Ashley	Ershi St	bok	<u>1305</u> 41	07 7879		٠
•	Name of Person		Area Code	Daytime Telephone Nun	ibet .	
Enclosed is a ch	neck for the following	amount:				
\$25.00 Filin	ng Fee ☐ \$30.00 Cert		5.00 Filing Fee & ertified Copy		Filing Fee, Scate of Status &	•

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sayblee Handmad	e Natural Hair care ELE
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)
(Name of the Limited Liability Compa (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company Florida document number	were filed on 04 03 2012 and assignation
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	lity company here:
Sayblee LLC he new name must be distinguishable and contain the words "Limited Liabil	. :
he new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)	723 NE 91St St Apt 1C Miami, FL 33138
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	723 NE 91st St Apt 1C Miami, FL 33139
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our records, <u>enter the name of the ne</u> :
Name of New Registered Agent: ASMI	ey Ershi Sebok
New Registered Office Address: 723 N	ey Ershi Sebok E 91 St St Apt 1C Enter Florida street address
Mian	
lew Registered Agent's Signature, if changing Registered Agent:	City Zip Code

N

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u> 1 itie</u>	Name	Address	Type of Action
MGRM	Sayblee Darsale	8423 NW 7th Ave	
	·	Miami, FL 33150	Kemove
			□ Cainge
MGRM	Cynthia Sayblee Dars	ale 723 NE 91st St Apt 10	S Add
		Miami, FL 33/38	□ Reraove .
			Change
MGRM	Ashley Ershi Sebok	723 NE 91st Apt 1C	badd
	•	Miami, FL 33138	II Remove
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		MINERAL CONTRACTOR OF THE PROPERTY OF THE PROP	CI Add
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			Cl Add
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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iffective date, if other than the date of filing:	vent to 605.020 not be listed a
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t The 90th day after the record is filed.	he earlier o
stated September 12, 2016. Synature of a member or authorized representative of a member	
Cynthia Sayblee Darsale	

Page 3 of 3

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