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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	•	r	r	••
SUBJ	ECT: Millennium	Hair L	Company Company		
The er	nclosed Articles of Amendment and fee	s) are submitted for f	iling.		
Please	return all correspondence concerning the	nis matter to the follo	wing:		
		Albert Name	Tysun of Person		12 OEC 10
	13		Company W. 50 M S Idress	7	PH 3: 00
	Mic	City/State Amoregu J address: (to be used for	Fl 33 D27 and Zip Code 97 D Marl future annual Aport notificat	1. Com	
For fu	Patricia Carvil	-	P.C. 786) 214 Area Code & Daytime To	- 20 Z 6 elephone Number	
41	sed is a check for the following amount: 5,00 Filing Fee	ee & □\$55.0 Status Cert	0 Filing Fee & ified Copy litional copy is enclosed)	□\$60.00 Filing Certificate (Certified Co (additional)	of Status & .

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

Millen	rium Hair 1	10
	ity Company as it now appears of a Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L</u> 12000/10/98	Company were filed on aug	
This amendment is submitted to amend the following:	·	SEE. PL
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	ORIGINAL TO THE PARTY OF THE PA
The new name must be distinguishable and end with the w	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
	t .	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	 	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
<u></u>		, 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

MCKM = M	anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Albert Tyson	12882 SW 50 ST	Add
		12882 SW 50 th St Miramar, Fl. 33027	Remove
			
			Add
			Remove
			_
			Add
			Remove
na .			Add
			Remove
da meri — indintrono			Add
			Remove
			Add
	•		Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Adding EIN: 46-0934971
Mading CIII.
O {
Dated December 6 . 2012.
7
When I have
Signature of a member or authorized representative of a member
Albert Tisan
Albert Tyson Typed or pyinted name of signee
· · · · · · · · · · · · · · · · · · ·

Filing Fee: \$25.00