## L12000156927

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporation	ons		هدر دست
SUBJECT: PARI	142 2.	ON, LLC	
SUBJECTS: 1 7 1 (44)	Name of Lim	nited Liability Company	, <u></u>
The enclosed Articles of Amend	lment and fee(s) are sub	omitted for filing.	
Please return all correspondence	concerning this matter	to the following:	
	MARK	WOODLGC Name of Person	K, ESQ
		Firm/Company	Woodlock Construction Law Firm, P.A. 1350 Orange Avenue, Suite, 280 Winter Park, Florida 32785
		Address	The state of the s
		City/State and Zip Code	
M	ARKE WOOL	LOCKLAW. C	COM
<del></del>	E-mail address: (	to be used for future annual	report notification)
For further information concerni	ing this matter, please c	all:	
MARK WOOD	LOCK ESQ	at (407)	109-5305
Name of Person	· · · · · · · · · · · · · · · · · · ·	Area Code	Daytime Telephone Number
Enclosed is a check for the follo	wing amount:		
	30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Certificate of Status &
Mailing Address:		Street Ad	ldress:
Registration Section		Registration Section	
Division of Corpora	ations	Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PARIS SALO	P, LLC
( <u>Name of the Limited Liability Com</u> (A Florida Limite	ipany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Comparison of Co	ny were filed on $12(17/2012)$ and assigned
This amendment is submitted to amend the following:	V V
A. If amending name, enter the new name of the limited li	ability company here:
THE COLOR AFFAIR SALON ORL The new name must be distinguishable and contain the words "Limited Lie	
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 office agent and/or the new registered office address here:	ee address on our records, <u>enter the name of the new registerec</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
<del>-</del>	, Florida
New Registered Agent's Signature, if changing Registered Agei	·
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offi company has been notified in writing of this change.	is provided for in Chapter 605, F.S. Or, if this document is

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>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			☐ Change
· <del></del>			□Add
			Remove
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	1		Remove
		<del></del>	☐Change
			□Add
			Remove
			□Change

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	<u> </u>
f an ef <u>Note:</u>	tive date, if other than the date of filing:
e reco d is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	APPIL 7,2022
	*
	Signature of a member or authorized representative of a member