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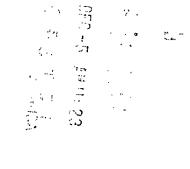
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BRILLIANT BEAUTY, UC Name of Limited Liability Company
The enclosed Articles of Amendment and fec(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
LATORIA Polites
Beilliant Beauty, 11c
10924 Leys Coute De.
21VERVIEW FL 33579 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (813) 495 70216 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City	_, Florida	Zip Code	·
	Enter Flor		s	
New Registered Office Address:	Futor Flor	ida street addres		<u>-</u>
Name of New Registered Agent:				
B. If amending the registered agent and/or registered agent and/or the new registered office		ords, enter the	name o	f the new
	1-0-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	t	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	*
(Mailing address MAY BE A POST OFFICE BO	<u></u>	·	, ;;	
Enter new mailing address, if applicable:		*	:5	· · · · · · · · · · · · · · · · · · ·
		ي .	350	**************************************
			. 24 - 240	
(Principal office address MUST BE A STREET.	ADDRESS)			
Enter new principal offices address, if applicab	ole:			•
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the	designation "LLC	or the a	bbreviation
A. If amending name, enter the new name of the	he limited liability company here:			
This amendment is submitted to amend the follow	ring:			
Florida document number <u>L13000095</u>	<u> 140</u> .			
The Articles of Organization for this Limited Liab		13	_ and ass	igned
(A FI	forida Limited Liability Company)			
(Name of the Limited Li	iability Company as it now appears on our lorida Limited Liability Company)	r records.)	*****	

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

MGR = Manager

MGRM = Managing Member Address Type of Action <u>Title</u> **Name** LATORIA Polite 10924 Keys GATE De. M62 RIVERVIEW, FL 33579 20924 Keys Chate De. RIVERVIOW, FL 33579 MGRM LATORIA Polite Remove Remove Remove

). If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated _	November 20th, 2013.
	Poite
	Signature of a member or authorized representative of a member
	LATORIA HOLITE Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00