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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Opulent Hair & Beauty, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rubert A. HENRY
Opulent Hair & Blanty, LCC Firm/Company
4441 Northwest 207th DR. Address
Mianu Gardens, FL 33055
Robert Her Her Q Q Q L, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert HENRY at (786) 286 - 0376 Name of Person Area Code Daytime Telephone Number
And cook Sujana releptions relations
Enclosed is a check for the following amount:
\$\frac{1}{2}\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$

✓ 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	•	
Opulent Hair & 1 (Name of the Limited Liability Company)	Beauty, L.L.C.	TO CO
(A Florida Limited Lie	bility Company)	42 6 <u>1</u>
The Articles of Organization for this Limited Liability Company we Florida document number	ere filed on	OF STATE ORIDA
This amendment is submitted to amend the following:		• •
A. If amending name, enter the new name of the limited liability The new name must be distinguishable and contain the words "Limited Liability	HERPRISES, L.I	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	Same	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same	
B. If amending the registered agent and/or registered office address here:	ce address on our records, <u>ente</u>	er the name of the new
Name of New Registered Agent:	Some	
New Registered Office Address:	Enter Florida street address A, 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 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>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00