

L14000126371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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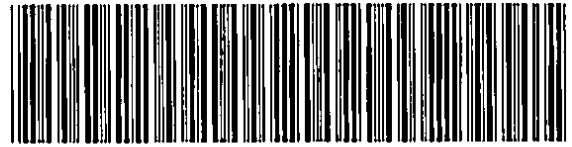
(Business Entity Name)

(Document Number)

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AUG 06 2018
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18 JUL 30 PM 6:41
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA LASH, 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:

B BRUCE MYERS

Name of Person

Firm/Company

2900 N MILITARY TRAIL, SUITE 247

Address

BOCA RATON, FL 33431

City/State and Zip Code

bbmyersmd@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Greenberg

954

560-3283

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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

FILED
19 JUL 30 PM 6:14
TALLAHASSEE, FLORIDA
CLERK OF CIRCUIT COURT

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FLORIDA LASH, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/12/2014 and assigned
Florida document number L14000126371.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2900 N MILITARY TRAIL, SUITE 247

(Principal office address MUST BE A STREET ADDRESS)

BOCA RATON, FL 33431

Enter new mailing address, if applicable:

2900 N MILITARY TRAIL, SUITE 247

(Mailing address MAY BE A POST OFFICE BOX)

BOCA RATON, FL 33431

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

B BRUCE MYERS

New Registered Office Address:

2900 N MILITARY TRAIL, SUITE 247

Enter Florida street address

BOCA RATON

Florida 33431

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MYERS, B BRUCE	2900 N MILITARY TRAIL	<input type="checkbox"/> Add
		SUITE 247	<input type="checkbox"/> Remove
		BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Change
MGR	ORR, JOEY	9439 BOCA RIVER CIRCLE	<input type="checkbox"/> Add
		BOCA RATON, FL 33434	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ORR, JOEY	9439 BOCA RIVER CIRCLE	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33434	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DEFRANCESCO, DESIREE	9439 BOCA RIVER CIRCLE	<input type="checkbox"/> Add
		BOCA RATON, FL 33434	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR		9439 BOCA RIVER CIRCLE	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33434	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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JUL 30 PM 6
18
FBI - MEMPHIS

FILED
JUL 23 PM 6:44
18
FBI - NEW YORK

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JULY 26, 2018

B BRUCE MYERS

Filing Fee: \$25.00