L14000127876

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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22 JUL 28 PH 3: 30

T. MATTHEWS



RECEIVED

2022 JUL 28 PM 3: 17

FLORIDA DEPARTMENT OF STATE SEED OF Corporations TALLANY, SEE, F

June 8, 2022

TINA CROWELL 3270 LOGAN DR PENSACOLA, FL 32503

SUBJECT: CIAO BELLA BOUTIQUE AND SALON LLC

Ref. Number: L14000127876

We have received your document for CIAO BELLA BOUTIQUE AND SALON LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews **OPS**

Letter Number: 122A00012460

COVER LETTER

SUBJECT:	CIAO BEL	LA BOUTIQUE AND SALON	LLLC	·
SUBJECT		Name of Limi	ted Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		TINA CROWELL		
			Name of Person	
			Firm/Company	
		3270 LOGAN DR		
			Address	
		PENSACOLA, FL 32503		
			City/State and Zip Code	
		E-mail address: (0	to be used for future annual report notif	ication)
For further in	nformation c	oncerning this matter, please ca	all:	
TINA CRO	WELL		850 723-6107 at ()	
•	Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a	t check for th	ne following amount:		
□ \$25.00 I	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:

TO:

Registration Section Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SLUBETARY OF STATE DIVISION OF CORPORATIONS

22 JUL 28 PH 3: 30

CIAO BELLA BOUTIQUE AND SALON LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company	were filed on $\frac{08/14/14}{}$	and assigned
Florida document number L14000127876		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	HEATHER STEVENS	
(Principal office address MUST BE A STREET ADDRESS)	3014 E CERVANTES ST	
	PENSACOLA FL 32503	
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: Name of New Registered Agent:	address on our records, <u>ente</u>	r the name of the new reg
New Registered Office Address:	Enter Florida street addre	ess
<u> </u>	, F	lorida
***	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 amending Authorized Person(s) authorized to manage, enter the title, mane, and haddress of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Fitte</u>	Name .	Address	Type of Action
MER	HNA UROWEH	3014 F CERVANTES ST	Lladd
		PENSACOLA FL 32503	≅Remove
			☐Change
MEG	HEATHER STEVENS	3014 E CERVANTES ST	
		PERSACOLA FL 32503	□Remove
			Change
			□ Remove
			Change
			C Add
			TRemove
			Change
			🗀 Add
			□Remove
			□Add
			Петоче
			□ Change

TINA CROWELL IS NO	LONGER ASSOCIATED WITH CIAO B	ELLA BOUTIQUE AND SALON.

	<u> </u>	22
		JUL
		№
	***************************************	3
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	1	30
	L-31884	
 		
ctive date, if other than		(optional)
: If the date inserted in th	e must be specific and cannot be prior to date of filing is block does not meet the applicable statuto the Department of State's records.	
ord specifies a delaved effi filed.	ective date, but not an effective time, at 12:0	l a.m. on the earlier of: (b) The 90th day a
MARCH 17	2022	
<u> </u>	·· ·	

Typed or printed name of signee