

L15000023830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

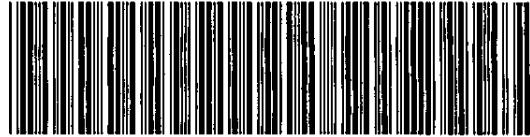
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 22 2016

BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EasyLocHair Tool 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:

EzzieD. Fawkes

Name of Person

EasyLocHair Tool LLC

Firm/Company

233 Mitchell Street SW, Suite 520

Address

Atlanta, GA 30303

City/State and Zip Code

Doreen@EasyLocHairTool.com

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

For further information concerning this matter, please call:

EzzieD. Fawkes

404

228-7045

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

EasyLoHair Tool 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 February 7, 2015 and assigned
Florida document number L15000023830.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

233 Mitchell Street SW
Suite 520
Atlanta, GA 30303

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2015 JUL 21 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

Enter Florida street address

_____, **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>	<u>Address</u>	<u>Type of Action</u>
AMBR	FawkesFamily Industries LLC	1207 Pelote Cemetery Road	<input checked="" type="checkbox"/> Add
		Lithia, Florida 33547	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	EzzieD. Fawkes	1205 Pelote Cemetery Road	<input type="checkbox"/> Add
		Lithia, Florida 33547	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Antonio D. McFarland	8419 Crane Road	<input type="checkbox"/> Add
		Jonesboro, Georgia 30236	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alan A. Smiley	4848 Highlands Place Drive	<input type="checkbox"/> Add
		Lakeland, Florida 33813	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

2010 JUL 21 AM 11:05
ALBANY, NY
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2010 JUL 21 A.D. 54
U.S. DEPT. OF JUSTICE
TALLAHASSEE, FLORIDA

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 9, 2016

EzzieD. Fawkes

Typed or printed name of signee