# L15000053323

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# COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Plush Beauty Bar 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:
Ashley M Dean
Name of Person
Firm/Company
814 Hillside Terrace
814 Hillside Terrale
Brandon, FL 33571
Dean. Asnly @ Ord. Con
E-mail address: (to be used for fiture annual report notification)
For further information concerning this matter, please call:
Ashley Dear at (813), 714-1720 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed)\$\$ \$25.00 Filing Fee \$\ \text{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**

Plush Beaut	y Bar LLC
(A Flo	bifity Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number LIS 0000 53323	
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the l	imited liability company here:
Posh Beauty Bar W	•
The new name must be distinguishable and end with the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:	Z OZE
(Principal office address MUST BE A STREET AD	DRESS)
Enter new mailing address, if applicable:	- in the second
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new address here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
Non-Designated Amends Clauseau Makes to Builde	City Zip Code
New Registered Agent's Signature, if changing Register	ered 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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(110)0	1015	
ated 4-10/2	Signature of a member or authorized represen	

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Filing Fee: \$25.00