LD00135892

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
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(Document Number)			
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SCURE FOR STATE

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COVER LETTER

Registration Section

TO:

Division of Cor	porations			
Gloria E. Ba	ailey, LLC			
SUBJECT:	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Gloria E. Bailey			
		Name of Person		
	Lash Lacquer and More			
		Firm/Company		
	2237 Mullet Lake Park Ros	ad		Laure La Laure Laure La Laure Laure La
		Address		5
	Geneva, FL 32732			16 HAY 16 PH
		City/State and Zip Code		- on ;
	gloweena@yahoo.co.uk	to be used for future annual report notific	etion)	=
For firsther information a	oncerning this matter, please ca	•	auou)	1: 28
	oncerning this matter, please ca			Ç.
Gloria E. Bailey		321 287-7333 at ()		
Name o	f Person	Area Code Daytime	Celephone Number	
Enclosed is a check for the	ne 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)	
Registr Divisio P.O. B	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions	

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gloria E. Bailey, LLC			
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	,	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L15000135892}{L15000135892}$.	were filed on	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Lash Lacquer and More, LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	110 East Broadway Street	7	
(Principal office address MUST BE A STREET ADDRESS)	Suite 106	=	
	Oviedo Fl 32765		
		o ::	
Enter new mailing address, if applicable:	2237 Mullet Lake Park Road	PH	
(Mailing address MAY BE A POST OFFICE BOX)	Geneva FL 32732		
		æ .	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:		er the name of the new	
	, Florida _	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	e performance of my duties, and I ar	n familiar with and	

If Changing Registered Agent, Signature of New Registered Agent

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, 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>	Type of Action
Owner	Gloria E. Bailey		□ Add
		<u></u>	□ Remove
			■ Change
	***************************************		□ Add
			☐ Remove
			□ Change:
,			Add or
			☐ Remove_
			□ Change
<u></u>			□ Add
			Remove
			Change
		 	Add
			□ Remove
			Change
			Add
			□ Remove
			. Change

	On page two, the change is from Manager to Owner.	
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		- -
		: 28 -
		_
(If an e	tive date, if other than the date of filing:	505.0207 (3) isted as the
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earle 90th day after the record is filed.	rlier of:
Dated	10 may 2016.	
	Xlaw 5 Buls	
	Signature of a member or authorized representative of a member Glocia E. BAITE(/	
	(Alopin = Britar)	

Page 3 of 3

Filing Fee: \$25.00