

From: Angelica Mohamad
5/25/2020

Fax: 13054448800

To:

Fax: (850) 617-6383

Page: 2 of 5

06/25/2020 11:06 AM

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC
Account Number : I20150000089
Phone : (305)444-8800
Fax Number : (305)444-4010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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STEP THREE USA LLC

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JUN 25 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STEP THREE USA 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 08/19/2015 and assigned Florida document number L15000140173.

This amendment is submitted to amend the following:

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

MYTH BEAUTY SUPPLY AND EDUCATION USA LLC

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)

5747 BIRD ROAD

CORAL GABLES, FL 33155

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5747 BIRD ROAD

CORAL GABLES, FL 33155

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

City, Florida 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

[illegible]

[illegible]

Typed or printed name of signee