

L15000145139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

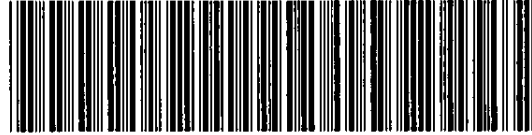
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 06 2015
Y SULKER

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

Phresh Cutz Barber Shop 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 8/25/15 and assigned Florida document number L15000145139.

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) _____

6076 Okeechobee Blvd Suite 40
West Palm Beach FL
33417

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: _____

Tiffany Hodges / Charlie Angry

New Registered Office Address: _____

6076 Okeechobee Blvd Suite 40

Enter Florida street address

West Palm Beach, Florida 33417
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.

Charlie Angry

If Changing Registered Agent, Signature of New Registered Agent

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Phresh Cutz BarberShop 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:

Charlie Angry
Name of Person
Phresh Cutz BarberShop LLC
Firm/Company
Leone Creechobee Blvd Suite 40
Address
West Palm Beach, FL 33417
City/State and Zip Code
Acharlie573@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charlie Angry at (561) 755-0592
Name of Person Area Code Daytime Telephone Number

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Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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	Charlie Angry	6076 Okeechobee Blvd Suite 40	<input type="checkbox"/> Add
		West Palm Beach Fl 33417	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tiffany Hodges	6076 Okeechobee Blvd Suite 40	<input checked="" type="checkbox"/> Add
		West Palm Beach Fl 33417	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Charlie Angry	6076 Okeechobee Blvd Suite 40	<input type="checkbox"/> Add
		West Palm Beach, Fl 33417	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Tiffany Hodges	6076 Okeechobee Blvd Suite 40	<input type="checkbox"/> Add
		West Palm Beach, Fl 33417	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

All mailing addresses are 6676 Okeechobee Blvd
suite 40, West Palm Beach, FL 33417

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated October 30th, 2015.

Charlie Angry
Signature of a member or authorized representative of a member

Charlie Angry
Typed or printed name of signee