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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SEP 30 2019  
S. YOUNG

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SEP 30 2019  
TALLAHASSEE, FLORIDA

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AFRICAN HAIR BRAIDING BY MARIAM 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:

MARIAM BARRY  
Name of Person

AFRICAN HAIR BRAIDING BY MARIAM LLC  
Firm/Company

7945 103<sup>RD</sup> ST SUITE 15  
Address

JACKSONVILLE, FL. 32210  
City/State and Zip Code

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

For further information concerning this matter, please call:

MARIAM BARRY at ( 904 ) 422-8787  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status<br>Certified Copy<br>(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

AFRICAN HAIR BRAIDING BY MARIAM LL  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_

Florida document number LF5000211508

This amendment is submitted to amend the following:

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

THE BMMS AFRICAN SISTERS BOUTIQUE BY MARIAM  
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8987 SHINDLER CROSSIN  
JACKSONVILLE, FL. 322

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8987 SHINDLER CROSSIN  
JACKSONVILLE, FL 3

B. If amending the registered agent and/or registered office address on our records, enter the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MARIAM BARNI

New Registered Office Address:

8987 SHINDLER CROSSIN 794510

Enter Florida street address

JACKSONVILLE

Florida

322

City

Zip Co.

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 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 attending Authorized Person(s) authorized to manage, please list below  
or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Ty</u>
_____	_____	_____	<input type="checkbox"/>
		_____	<input type="checkbox"/>
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		_____	<input type="checkbox"/>
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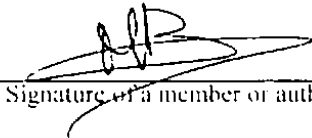
Lined area for text entry.

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  
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be  
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 e  
(b) The 90th day after the record is filed.

Dated 09/30/19

  
Signature of a member or authorized representative of a member

MARIAM BARRY  
Typed or printed name of signee