

46000030927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

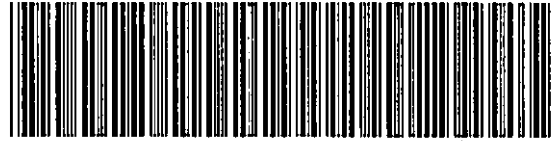
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17 OCT 30 AM 9:56

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COVER SHEET

TO: Registration Section  
Division of Corporations

Beauty Supply BBS LLC

SUBJECT: \_\_\_\_\_  
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:

Haim Arvili

\_\_\_\_\_  
Name of Person

Beauty Supply BBS LLC

\_\_\_\_\_  
Firm/Company

2545 W 80 St Unit 7

\_\_\_\_\_  
Address

Hialeah/ FL/ 330106

\_\_\_\_\_  
City/State and Zip Code

salo\_arvili@hotmail.com

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

For further information concerning this matter, please call:

Salomon Arvili

305

9659078

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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)

**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 ORGANIZATION OF

Beauty Supply BBS 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 Florida and assigned Florida document number L16000030927

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 "L.L.C." or the abbreviation "L.C."

Enter new principal offices address, if applicable:

2545 W 80 St Unit 7 Hialeah Fl 33016

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

2545 W 80 St Unit 7 Hialeah Fl 33016

(Mailing address MAY BE A POST OFFICE BOX)

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:

Haim Arvili

New Registered Office Address:

2545 W 80 St

Enter Florida street address

Hialeah

Florida

33016

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.

Handwritten signature of Haim Arvili

If Changing Registered Agent, Signature of New Registered Agent

Vertical stamp: FILED, 17 OCT 30, 9:56 AM

MGR = Manager  
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Haim Arvili	2545 W 80 St Unit 7 Hialeah Fl 331	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Salomon Arvili		<input type="checkbox"/> Add
		1000 Island Boulevard apt 2602 Ave	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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17 OCT 30 AM 9:56

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

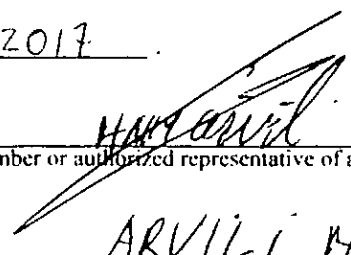
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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 25<sup>th</sup>  
10/25/ 2017



Signature of a member or authorized representative of a member

ARVILI HAIN  
Typed or printed name of signee