

L16000034751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

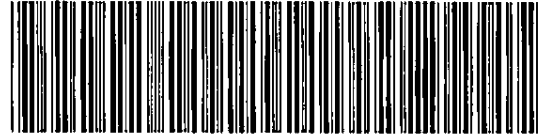
(Business Entity Name)

(Document Number)

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STATE OF MISSISSIPPI  
FALL ARCADE, MISSISSIPPI

D. SCOTT  
AUG 16 2017

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: STRAIGHT AHEAD BEAUTY 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:

TAL GILBOA  
Name of Person  
STRAIGHT AHEAD BEAUTY LLC  
Firm/Company  
3933 Pembroke Road  
Address  
Hollywood, FL 33021  
City/State and Zip Code  
alyssa@straightaheadbeauty.com  
E-mail address: (to be used for future annual report notification)

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17 JUN 14 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Alyssa at (786) 226-9076  
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 AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

STRAIGHT AHEAD BEAUTY 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 02/18/2016 and assigned Florida document number L16000034787.

This amendment is submitted to amend the following:

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

CAPELLI TRADE 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:**

3933 PEMBROKE ROAD

**(Principal office address MUST BE A STREET ADDRESS)**

HOLLYWOOD, FL 33021

**Enter new mailing address, if applicable:**

3933 PEMBROKE ROAD

**(Mailing address MAY BE A POST OFFICE BOX)**

HOLLYWOOD, FL 33021

**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:

3933 PEMBROKE ROAD

Enter Florida street address

HOLLYWOOD

City

Florida

33021

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	TAL GILBOA	3933 PEMBROKE ROAD	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33021	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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