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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	•
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT.	MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALL ANASSEE FLODINA

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COVER LETTER

TO:	Registration Se Division of Cor			¥		
		Palat	ka2Go LLC			
SUBJI	ECT:	Name of Lim	ited Liability Company			
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ondence concerning this matter	to the following:			
			Mia Dingle		<u> </u>	•
			Name of Person		25.0H	
			n/a		語の	
			Firm/Company		SEE C	; [-
			910 Saint Johns Avenue Apt 4		FLO	
			Address			
			Palatka, FL 32177		٠ ر	•
			City/State and Zip Code			
			mdingle9@gmail.com			
T 6	<u> </u>		to be used for future annual report noti	fication)		
ror iui		concerning this matter, please c				
	Mia Dingle		904 436-3810 at ()			•
	Name o	of Person	Area Code Daytim	e Telephone Number		
Enclos	ed is a check for t	he following amount:				
☑ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations lox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Palatka	2Go LLC	
(Name of the Limited I	Liability Compa Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company 	were filed on February 26, 2016	and assigned
his amendment is submitted to amend the followi	ng:		
. If amending name, enter the new name of th	e limited liab	ility company here:	
Elite Grooming Studio LLC			
he new name must be distinguishable and contain the word	s "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		914 Saint Johns Avenue, Suite 1	
(Principal office address MUST BE A STREET ADDRESS)		Palatka, FL 32177	
			16 SE SE
Enter new mailing address, if applicable:		914 Saint Johns Avenue, Suite 1	HMY CRETA
Mailing address MAY BE A POST OFFICE BO	(X)	Palatka, FL 32177	E NY (
3. If amending the registered agent and/or egistered agent and/or the new registered office	registered of		enter the name of the
Name of New Registered Agent:	Xavier Whitfie	ld	
New Registered Office Address:	914 Saint John	s Avenue, Suite 1	,
		Enter Florida street address	
_	Palatka	, Flori	da <u>32177</u>
		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.

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>	Address	Type of Action
MGR	Xavier Whitfield	914 Saint Johns Avenue, Suite 1	■ Add
		Palatka, FL 32177	🗖 Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove Remove Changer
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	May 1, 2016		ഗ	
lfan efi Note:	we date, if other than the date of filing: May 1, 2016 (or ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at If the date inserted in this block does not meet the applicable statutory filing requirements, the ent's effective date on the Department of State's records.	otional) fter filing.) Pursua this date will no	nt to 60: t be list	5.020 ed a
ne red The	ord specifies a delayed effective date, but not an effective time, at 12:0. 90th day after the record is filed.	1 a.m. on the	earli	er o
Dated	May 13 , 2016.			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00