L16000073156

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
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COVER LETTER

SUBJECT:	Elysian Nai	lbar & Spa, LLC		
SOBJECT.		Name of Limi	ted Liability Company	
The enclosed	d Anticles of .	Amendment and fee(s) are subr	nitted for filing.	
Please return	all correspo	ndence concerning this matter t	to the following:	
		Harrison Whittaker		
		Elysian Nailbar & Spa, LLC	Name of Person	
		5881 NW 151st Street, #10	Firm/Company	
		Miami Lakes, FL 33014	Address	
		Info@ElysianSalons.com	City/State and Zip Code	
For further in	nformation co	oncerning this matter, please ca	o be used for future annual report i	nourication)
Harrison Wh	Trison Whittaker			
			Thou Sale Day	and receptione rander
Enclosed is a	a check for th	e following amount:		
₩ \$25.00 F	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

TO:

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

Elysian Nailbar & Spa, LLC	
(<u>Name of the Limited Liability Company as it now appe</u> (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited Liability Company were filed on	4/13/2016 and assigned
Florida document number L16000073156	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>here</u> :
Elysian Nails, LLC	
'he new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	A A
	72 73
Enter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, <u>enter the name of the ne</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter F	lorida street address
	P3

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.

City

Zip Code

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
			🗖 Add
			Remove
			☐ Change
			□ Remove
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			Change

			e new name "Elysian	~	
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Tective date, if	ther than the date of	'filina:		(anti1)	
an effective date is	sted, the date must be speci-	ific and cannot be prior	to date of filing or more:	(optional) than 90 days after filing.) Pursuant to 605.020
ocument's effecti	serted in this block does to date on the Department	inot meet the applicant of State's records.	able statutory filing re	quirements, this date	will not be listed as
record speci	es a delayed effecti	ive date, but no	t an effective time	e, at 12:01 a.m.	on the earlier o
The 90th day	fter the record is f	iled.			
		2019			
, April 12th	··	 , _	·		
April 12th		1 1			
April 12th					
ated April 12th	Signature	of a member or autho	rized representative of a	member	

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Filing Fee: \$25.00