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| PICK-UP | ☐ WAIT | MAIL |
| (Busi | ness Entity Nam | ne) |
| (Docu | ıment Number) | · · · · · · · · · · · · · · · · · · · |
| Certified Copies | Certificates | of Status |
| Special Instructions to Fi | ling Officer: | |
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Office Use Only



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SECRETARY OF STATE ASSEE, FLORIDA SON SI CH

MAY 03 2016 S. YOUNG

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: Las Olas Isles Beauti Sificanow plan, le 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: |
| Tom Godart Name of Person |
| Firm/Company |
| 401 EAST LAS OLAS Blvd., Suite 1450 Address FT. Lauderdal FL 33301 City/State and Zip Code F-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Person at (954) 522-8577 Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \(\text{Certificate of Status} \) \(\text{Certified Copy} \) \(\t |

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

| | its fifical | tion Pan ULC |
|--|---|------------------------------------|
| (Name of the Limited Liability Compar (A Florida Limited L | iv as it now appears on our iability Company) | records.) |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L 160000 79 2</u> 99 | were filed on <u>4/2</u> | 2/16 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabi | lity company here: | |
| LAS OLAS Foles Beautisteam? The new name must be distinguishable and contain the words "Limited Liabili | N Pear, L | CC - 300 |
| The new name must be distinguishable and contain the words "Limited Liabili | ty Company," the designation | "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | 2 5 5 7 |
| (Principal office address MUST BE A STREET ADDRESS) | | 2 SY |
| | | <u> </u> |
| , | | 5: 04 |
| Enter new mailing address, if applicable: | | <u> </u> |
| (Mailing address MAY BE A POST OFFICE BOX) | N/A | |
| | | |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | | ecords, enter the name of the new |
| registered agent and/or the new registered office address here | • | |
| Name of New Registered Agent: | N/A | |
| New Registered Office Address: | | |
| • | Enter Florida street | address |
| | Cit | |
| | 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:

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
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| an effective d ote: If the | te, if other than late is listed, the date date inserted in th ffective date on th | must be specific is block does n | c and cannot be not meet the a | e prior to date o applicable sta | of filing or more | than 90 days aft | t ional) er filing.) Pursua iis date will no | nt to 605.02 t be listed |
| record s The 90th | pecifies a dela day after the | yed effective record is file | /e date, bu ed. | it not an e | ffective tim | e, at 12:01 | a.m. on the | earlier |
| | 4/27/16 | <u>. </u> | | · | | | | |
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Page 3 of 3

Filing Fee: \$25.00