# L16000083535

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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# **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

Jaimie Joh SUBJECT:	uson Nails, LEC				
SOBJECT:	Name of Lim	ited Liability Company	<del></del> .		
	Amendment and fee(s) are sub	·			
, , , , , , , , , , , , , , , , , , , ,		to the following.			
	Jaimie Johnson				
		Name of Person			
	Jaimie Johnson Nails, LLC	•			
		Firm/Company			
	3636 Webber Street				
		Address			
	Sarasota, FL 34232				
	City/State and Zip Code				
	jaimiejohnson3@gmail.con				
	E-mail address: (	to be used for future annual report notifi	ication)		
For further information c	oncerning this matter, please co	all:			
Jaimie Johnson		941 962-3552 at ()			
Name o	i Person	Atea Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	S30.00 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)		
<u>Mailing Addres</u> Registration ! Division of C	Section	<u>Street Address:</u> Registration Sec Division of Corp			
P.O. Box 632		The Centre of T:			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 APR - 1 PM 4: 53

Jaimie Johnson Nails, LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited I	liability Company were filed o	n April 28, 2016	and assigned
Florida document number L16000083535	<u></u> ,		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability compar	<u>ıy here</u> :	
Jaimie Johnson Eternal Beauty, LLC			
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE.	ET ADDRESS)		
1			
Effiter new mailing address, if applicable:			
	<del></del>		
(Mailing address MAY BE A POST OFFICE	<u> </u>	<del></del>	<del></del>
B. If amending the registered agent and/or agent and/or the new registered office addresses.	registered office address on o	ur records, enter the nar	ne of the new registered
agent and/or the new registered office atten-	iss nere.		
Name of New Registered Agent:	Jaimie Johnson		
New Registered Office Address:	3636 Webber Street		
	Ente	r Florida street address	
	Sarasota	, Florida _ <sup>3-</sup>	4232
	City		Zip Code
Van Danistana Laura San Stan Laura San Carlos	n :		

#### 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.

f 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
			□Add
		□Remove	
			□Change
<del></del>			□Add
			□Remove
			□Change
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			□Change

# Page 2 of 3

). If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	March 24 2024
	Signature of a member or authorized representative of a member
	Jaimie Johnson  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00