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Special Instructions to Fili	ng Officer:	





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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Enoll Man L	ashl	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		avid Sherman Name of Person	
		Mazin Lash Studio	THE THE P
	130	4 Coralsings Dr. Address	P TO THE PERSON OF THE PERSON
		Coral Strikes F1. 33	7.7
	E-mail address: (herman Ramazing lesh to be used for future annual report notifi	Studio.com ication)
For further information c	oncerning this matter, please ca	all:	
	Sharman FPerson	at (<u>954</u>) 649-3. Area Code Daytime	283 Telephone Number
Enclosed is a check for the	ne 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)
MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Knollman		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liab	ility Company were filed on O9/28	and assigned
Florida document number <u>∠ 160∞18⊅868</u>		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
- DJ Lash The	DJLash, LLC	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
	75.2 7 7 1 1 2 1 1 1	<u> </u>
		F. 7
Enter new mailing address, if applicable:		APR APR
(Mailing address MAY BE A POST OFFICE BC	<u></u>	SSE TO
		08 1
B. If amending the registered agent and/or registered agent and/or the new registered offic		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
		, Florida
	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 **Type of Action Address Title** <u>Name</u> Jenette Sherman 8249 Thanes blut worth A DAGO Boca Raton, Fl. 33433 ☐ Change □ Add ☐ Remove E Change □ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed.	an amenang any	other information, enter o	cinalige (i) incite (i)	en additional oncess, y n	occinar, in	
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Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The 90th day after the record is filed.	 -				P. 36	
Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The 90th day after the record is filed.					SS TO	
Effective date, if other than the date of filing:						<u> </u>
Effective date, if other than the date of filing: [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The effective time, at 12:01 a.m. on the earlier of the poth day after the record is filed.					For	_
Effective date, if other than the date of filing:						
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier. The 90th day after the record is filed.						_
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2019				ffective time, at 12:0	1 a.m. on the ear	lier of:
Dated	Dated	March 30th	. 2019			
					-	
Signature of a member or authorized representative of a member		<u> </u>	_			
Typed or printed name of signee		Dai	uid Sherma	w		