

L16000216908

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(City/State/Zip/Phone #)

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(Business Entity Name)

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FILED
2020 JAN 14 PM 1:35
SEDLICK, J. L.
FALL ARREST - 11/15/19

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N/A name chg

FEB 12 2020
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Cozmo Beaute LLC

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:

Alfrica Necole Robinson

Name of Person

Cozmo Beaute LLC

Firm/Company

2050 Collier Ave Ste 105

Address

Fort Myers, FL 33901

City/State and Zip Code

CholeyHairCo@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alfrica Necole Robinson 239 920-1045

Name of Person at () Daytime Telephone Number
Area Code

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Cozmo Beaute LLC

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

FILED
2020 JAN 14 PM 4:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/29/2016 and assigned

Florida document number L16000216908.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Choley Hair Company, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2050 Collier Ave

(Principal office address MUST BE A STREET ADDRESS)

Ste 105

Fort Myers, FL 33901

Enter new mailing address, if applicable:

PO BOX 50956

(Mailing address MAY BE A POST OFFICE BOX)

Fort Myers, FL 33901

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Alfrica Necole Robinson

New Registered Office Address:

2050 Collier Ave Ste 105

Enter Florida street address

Fort Myers, FL

City

Florida 33901

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

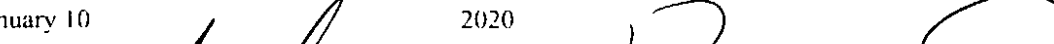
[illegible]

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(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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

January 10, 2020


Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Filing Fee: \$25.00