

L17000018512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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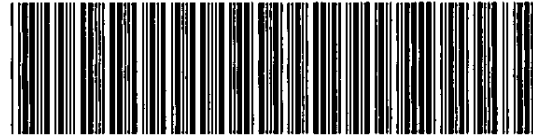
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

MAR 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ragazza Nail Cafe 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:

Jacqueline B. Reyes Macorini
Name of Person

Firm/Company

874 NW 170th Ter
Address

Pembroke Pines FL 33028
City/State and Zip Code

Jmacorini@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ana Rincon Diaz at (954) 647 1261
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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

Ragazza Nail cafe LLC

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

The Articles of Organization for this Limited Liability Company were filed on 1/24/2017

Florida document number L 17000018512

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

874 NW 170th Ter
Pembroke Pines FL 33028

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

874 NW 170th Ter
Pembroke Pines FL
33028

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:

Jacqueline B. Reyes de Macorini

New Registered Office Address:

874 NW 170th Ter

Enter Florida street address

Pembroke Pines, Florida 33028

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


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Ava F. Rincon Diaz	17019 NW 23 rd St	<input type="checkbox"/> Add
		Pembroke Pines FL	<input checked="" type="checkbox"/> Remove
		33028	<input type="checkbox"/> Change
MGR	Jacqueline B	874 NW 170 th	<input type="checkbox"/> Add
	Reyes de Macorini	Ter Pembroke Pines	<input checked="" type="checkbox"/> Remove
		FL 33028	<input type="checkbox"/> Change
MGR	Roberto Macorini	874 NW 170 th	<input type="checkbox"/> Add
	Cecchinato	Ter Pembroke Pines	<input checked="" type="checkbox"/> Remove
		FL 33028	<input type="checkbox"/> Change
MGR	Servicio y	874 NW 170 th	<input checked="" type="checkbox"/> Add
	Mantenimiento	Ter. Pembroke Pines	<input type="checkbox"/> Remove
	Macorini CA.	FL 33028	<input type="checkbox"/> Change
MGR	Trinidad Eugenia	900 NW 141 st Ave	<input checked="" type="checkbox"/> Add
	Zuleta	Apt 108.	<input type="checkbox"/> Remove
		Pembroke Pines FL 33028	<input type="checkbox"/> Change

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 SECRETARY OF STATE

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.


Signature of a member or authorized representative of a member

Jacqueline B. Reyes de Macorini
Typed or printed name of signee

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