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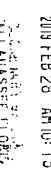
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## **COVER LETTER**

TO: Registration Section Division of Corpora			• •
SUBJECT:	et Brows	i Beauti	2019 FEB 28 AM 10: 15
3000Ee	Name of Limite	ed Liability Company	MLI AHASSEE, FLORIS
The enclosed Articles of Amo	endment and fee(s) are subm	itted for filing.	
Please return all corresponder			
	MARISI	1 Osterho	udt
-	coved Br	Name of Person  Firm/Company	4 11C
-	931 N.S	stale Ruad	134 Suite 1201 21
-	Hlancut	SPV IVI FL.	32714
_	V   SSC   W E-mail address: (to	to be used for flature annual report not	fication)
For further information conce	erning this matter, please call	l: //9-,	- (1) (
Name of Per	Sty March	at ( ) Area Code Daytim	e Telephone Number
Enclosed is a check for the fo	Howing amount:		
	330.00 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)

### 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

	U	r				
Covet F	) 	, 6	Scaut			
(Name of the Limite	<mark>d Linbility Compan</mark> A Florida Limited Li	y as it now and publity Compar	wars on our records.	.}		
The Articles of Organization for this Limited Lia デルック メーシュング はい	<u>Lli</u> .	were filed on	2-16-2	OΠ	and assigned	2019 FEB 28
A. If amending name, enter the new name of	the limited liabil	ity company	here:		60 S	
('.ove+ Alch	1emV	LLC				- AK IO:
The new name must be distinguishable and contain the wo	rds "Limited Liabili	ty Company," tl	ne designation "LLC"	or the abbrev		
Enter new principal offices address, if applica	ble:	<u>2735</u>	W. Stak	Rical	4342:	ت 
(Principal office address MUST BE A STREET	ADDRESS)	# 10c	1			
		LONGU	aca FL	<u> 327</u>	<del>19</del>	
		${\mathcal O}$	/\ \ \			
Enter new mailing address, if applicable:		- Supice	<u>e lui ceb</u>	<i>نن</i> و		
(Mailing address MAY BE A POST OFFICE B	OX)					
	<del></del>					
B. If amending the registered agent and/o registered agent and/or the new registered off			on our records,	enter the	name of the	e new
Name of New Registered Agent:				·		
New Registered Office Address:	2735	Vi Sk	the Road	434	:11041	_
	1	Enter i	Florida street address	01	11 <i>G</i>	
	1 ON W	)()()()	, Flo		In Code	
	1.)	Cuy		4	up come	

### 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>	Address	Type of Action
		_	
			☐ Remove
			☐ Change
	<u> </u>		Add
			□ Remove
			Change
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	_		□ Remove
			□ Change
		<del>-</del> -	Add
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	•		☐ Change
	<del></del>		Add
			☐ Remove
	•		
			Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del>, , , , , , , , , , , , , , , , , , , </del>
E. 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 605.0207 (3)(b)  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.
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.
Dated F.W. 26 . 2019.
Muse Stul
Signature of a member or authorized representative of a member  Avisa Signature of a member of signee

Page 3 of 3

Filing Fee: \$25.00