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PICK-UP	☐ WAIT	MAIL
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D. SCOTT 0CT 1 0 2017

COVER LETTER

Registration Section

TO:

Division	of Corp	orations					
	AUTY SO	DURCING, LLC					
SUBJECT:		Name of Lim	ited Liabilit	y Company	,		
The enclosed Arti	icles of A	mendment and fee(s) are sub-	mitted for	filing.			
Please return all c	correspon	dence concerning this matter	to the folk	owing:			
		LISETTE VEGA OR ELIZ	CABETH (DBADIA			
		1-11	Nan	e of Persor	1		
		BEAUTY SOURCING, LI	LC				
			Firm	n/Company			
		15805 BISCAYNE BLVD	, SUITE 3	11			
			1	Address			
		NORTH MIAMI BEACH,	FL 33160				
		issau@suma saum saum	City/Stat	e and Zip C	ode :		
		isaac@sumo-group.com E-mail address: (1	o be used f	or future an	nual report notification	<u>n)</u>	
For further inform	nation coi	ncerning this matter, please ca	ıll:				
Lisette Vega			4	305	454-9443		
	Name of l	Person	at (Area Code	Daytime Tele	phone Number	
Enclosed is a chec	ck for the	following amount:					
\$25.00 Filing	Fec	□ \$30.00 Filing Fee & Certificate of Status	Cer	00 Filing l tified Cop itional copy	у	Certificate of Status Certified Copy (additional copy is enclose	ed)
	Registrat Division P.O. Box	NG ADDRESS: ion Section of Corporations : 6327 see, FL 32314		Regi Divi Clift	EET/COURIER A stration Section sion of Corporations on Building Executive Center C	CANDA CANDA) ~~

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEAUTY SOURCING, L.L.C.

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000036147</u> .	were filed on $\frac{02/14/2017}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	15805 Biscayne Blvd, Suite 311
(Principal office address MUST BE A STREET ADDRESS)	North Miami Beach, FL 33160
Enter new mailing address, if applicable:	15805 Biscayne Blvd, Suite 311
(Mailing address MAY BE A POST OFFICE BOX)	North Miami Beach, FL 33160
registered agent and/or the new registered office address here	ffice address on our records, enter the name of the new e:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address , Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			☐ Remove
			□ Change
			Add
			☐ Remove
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Filing Fee: \$25.00