

L17000057497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

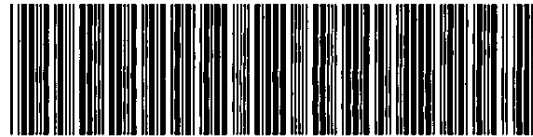
(Document Number)

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2017 MAY -5 PM 2:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

K. SALY

MAY - 9 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2017

JESSICA SUTHERLAND
310 NW 46TH ST
MIAMI, FL 33127

SUBJECT: HUSH COSMETICS II, LLC
Ref. Number: L17000057497

We have received your document for HUSH COSMETICS II, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 517A00008048

FILED
2017 APR 25
AM 10:25
TALLAHASSEE, FLORIDA
TAL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

HUSH Cosmetics II, 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:

Jessica Sutherland

Name of Person

Firm/Company

310 NW 46th St.

Address

Miami, FL 33127

City/State and Zip Code

Jsutherland@KIOAH.com

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

For further information concerning this matter, please call:

Jessica Sutherland

Name of Person

at

305, 975-0858

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

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
OF**

HUSH Cosmetics II, LLC.
(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

FILED
2017 MAY -5 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/13/17 and assigned
Florida document number LI7000057497.

This amendment is submitted to amend the following:

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

KIOAH Cosmetics, 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:

(Principal office address MUST BE A STREET ADDRESS)

~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~
310 NW 46th St
Miami, FL 33127
P.O. Box 370501 0
Miami, FL 33137-0501

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

N/A

City

Florida

N/A

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.

N/A

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

N/A

FILED

2017 MAY -5 PM 2: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

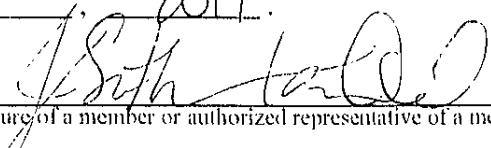
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E. Effective date, if other than the date of filing: 4/20/17 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date 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 4/20

2017


Signature of a member or authorized representative of a member

Jessica Sutherland
Typed or printed name of signee