

L170000 61853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2019 JAN 16 A 3:30
TALLAHASSEE, FLORIDA

1/23/19 DS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J.B. Hair & Nail Studio, 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:

James Buzard

Name of Person

J.B. Hair & Nail Studio, LLC

Firm/Company

11839 S.E. Hwy 464

Address

Ocklawaha, FL 32179

City/State and Zip Code

jbhair.studio0313@gmail.com

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

James Buzard

352

537-5522

at (_____) _____

Name of Person

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**

J.B. Hair & Nail Studio, 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 March 17, 2017 and assigned
Florida document number L17000061853.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

J.B. Hair & Nail Studio, LLC

11839 S.E. Hwy 464

Ocklawaha, FL 32179

FILED
2017 JUN 19 A 3:51
TALLAHASSEE, FLORIDA

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

Name of New Registered Agent:

James E. Buzard

New Registered Office Address:

11839 S.E. Hwy 464

Enter Florida street address

Ocklawaha

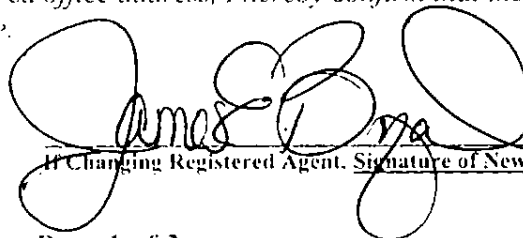
City

Florida 32179

Zip Code

Registered Agent's Signature, if changing Registered Agent:

by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and
the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is
led to merely reflect a change in the registered office address, I hereby confirm that the limited liability
y has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

_____ 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>
AMBR	Timothy Collette	11839 S.E. Hwy 464	<input type="checkbox"/> Add
		Ocklawaha, FL 32179	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2019 JAN 16 AM 3:51
CLERK OF SUPERIOR COURT
STATE OF FLORIDA

2019 JUN 16 A 3:31
FULTON ST. FLOR.

2019 JUN 16 A 3:31
TOLSON

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.

ed January 14th

2019

Signature of a member or authorized representative

James E. Buzard

Filing Fee: \$25.00