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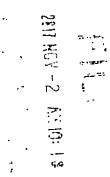
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WY HARRIS

## **COVER LETTER**

Please return all correspondence concerning this matter to the following:  RYAN FITZGERALD  Name of Person  YOUR BRAND PARTNERS  Firm/Company  712 2ND STREET  Address  NEPTUNE BEACH, FLORIDA 32266  City/State and Zip Code  RYAN@ CORTELLO.COM  E-mail address: (to be used for future annual report notitication)
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:  RYAN FITZGERALD  Name of Person  YOUR BRAND PARTNERS  Firm/Company  712 2ND STREET  Address  NEPTUNE BEACH, FLORIDA 32266  City/State and Zip Code  RYAN@ CORTELLO.COM  E-mail address: (to be used for future annual report notification)
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City/State and Zip Code  RYAN@CORTELLO.COM  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
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For further information concerning this matter, please call:
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Enclosed is a check for the following amount:
Certificate of Status Certified Copy Certificate of State (additional copy is enclosed) Certified Copy

MAILING ADDRESS:

TO:

Registration Section

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

BONDED BEAUTY LLC					
(Name of the Limited (A	Liability Compa Florida Limited 1	ny as it now appears on or liability Company)	ir records.)	<del></del>	
The Articles of Organization for this Limited Liab	oility Company	were filed on APRIL 2	STH, 2017	and assigned	
Florida document number 1.17000094381	<u>.</u>		_		
This amendment is submitted to amend the follow	ring:				
A. If amending name, <u>enter the new name of th</u>	ne <u>limited liab</u> i	ility company here:			
YOUR BRAND PARTNERS LLC.					
The new name must be distinguishable and contain the word	ds "Limited Liabil	ity Company," the designat	ion "LLC" or the abbi	eviation "L.L.C."	
Enter new principal offices address, if applicab	le:	712 2ND STREET			
Principal office address MUST BE A STREET A		NEPTUNE BEACH, E	LORIDA 32266		
	<u> </u>				
				10 :	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>		712 2ND STREET			
		NEPTUNE BEACH, F	LORIDA 32266	ā	
				50	
3. If amending the registered agent and/or egistered agent and/or the new registered offic	registered off e address here RYAN FITZGE	:	records, <u>enter th</u>	e name of the	
Name of New Registered Agent:	WIAWIII ZADAWALIA				
New Registered Office Address:	712 2ND STRE				
	NEPTUNE BEA	Enter Florida stre xC34		<b>、</b>	
-	INTELLOPIEDE	City	Florida <u>3226</u> 6	) 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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Effective date, if other than the da If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	e specific and cannot be p does not meet the ap	plicable statutory fi	r more than 90 days after ling requirements, this	filing.) Pursuant to 605.	.0207 ( ed as (
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Typed or printed name of signee

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