L17000125668

	(Requestor's Name)
	·····
I	(Address)
	(Address)
	(1001633)
	(City/State/Zip/Phone #)
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<u> </u>	(Business Entity Name)
l	(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations

JK SALON OPERATIONS, LLC

SUBJECT: ____

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:

Caitlin Katzenbach

Name of Person

Corporate Direct, Inc.

Firm/Company

2248 Meridian Blvd, Ste H

Address

Minden, NV 89423

City/State and Zip Code

info@corporatedirect.com

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

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status

S55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION** OF

JK SALON OPERATIONS, LLC			
(<u>Name of the Limi</u>	ted Liability Comp: (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L Florida document number L17000125668	.iability Company	were filed on <u>06/08/2017</u>	and assigned
This amendment is submitted to amend the following the following the submitted to amend the submitted to amend the following the submitted to amend the following the submitted to amend the submitted to amend the following the submitted to amend the following the submitted to amend	lowing:		
A. If amending name, enter the new name of	of the limited liab	<u>oility company here</u> :	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		7901 4th Street N., Suite 300	
		St. Petersburg, FL 33702	
Enter new mailing address, if applicable:		7901 4th Street N., Suite 300	
(Mailing address MAY BE A POST OFFICE BOX)		St. Petersburg, FL 33702	
			r r
			-
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>enter th</u>	e name of the new registered
agent and/or the new registered once addre	<u>ss nere</u> :		:.
Name of New Registered Agent:	Registered Age	ents, Inc	``````````````````````````````````````
	7901 4th Street	N., Suite 300	r
New Registered Office Address:		Enter Florida street address	
	St. Petersburg	Flori	da 33702

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.

City

Found Roberts If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Name	Address	Type of Action
MGR	Kerry Stewart	9099 ESTERO RIVER CIRCLE	🗆 Add
		ESTERO, FL 33928	Remove
			Change
MGR	Jordan Stewart	9099 ESTERO RIVER CIRCLE	🗋 Add
		ESTERO, FL 33928	🖬 Remove
			□Change
MGR	Kerry Stewart	7901 4th Street N., Suite 300	🖬 Add
		St. Petersburg, FL 33702	CRemove
			□Change
MGR	Jordan Stewart	7901 4th Street N., Suite 300	🖬 Add
		St. Petersburg, FL 33702	🗆 Remove
		<u> </u>	🗆 Add
			🗆 Remove
			Change
		<u> </u>	🗆 Add
			🗆 Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _______(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) <u>Note:</u> 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.

October 9 Dated	2023
Coutlin p	Signature of a member or authorized representative of a member
Caitlin Katzenbach	Signature of a member of authorized representative of a member

Typed or printed name of signee