

L17000152886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

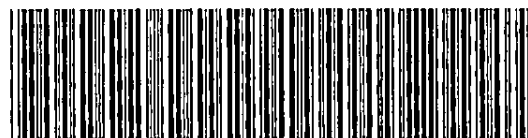
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200304086192

10/20/17--01023--006 \*\*25.00

FILED  
17 OCT 20 AM 11:23  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

---S. WARREN---

OCT 23 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: A Hair Affair LL

\_\_\_\_\_  
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:

Patricia G. Porter

\_\_\_\_\_  
Name of Person

A Hair Affair LLC

\_\_\_\_\_  
Firm/Company

2545 S. Atlantic Ave Apt 2104

\_\_\_\_\_  
Address

Daytona Beach Shores, FL 32118

\_\_\_\_\_  
City/State and Zip Code

flgirl716@aol.com

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

For further information concerning this matter, please call:

Patricia G. Porter

352

516-0447

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**

A Hair Affair 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 07/17/2017 and assigned Florida document number L17000152886.

This amendment is submitted to amend the following:

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

n/a

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:**

n/a

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

n/a

**(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:

Patricia G Porter

New Registered Office Address:

136 Beachcomber St. Unit C

*Enter Florida street address*

Daytona Beach Shores

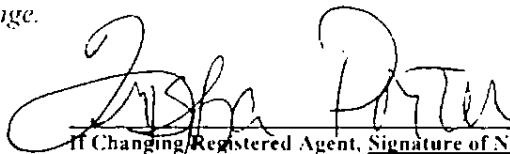
Florida 32118

*City*

*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

FILED  
JUL 20 AM 11:23  
CLERK OF  
SOLICITOR  
OF  
FLORIDA

**MGR = Manager**  
**AMBR = Authorized Member**

FILED  
Change  
77 OCT 20 AM 11:23  
Remove  
Change  
TALLAHASSEE, FLORIDA

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

**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.

Dated October 12 2017

Signature of a member or authorized representative of a member

Typed or printed name of signee

FILED  
17 OCT 20 AM 11:23  
SOUTHERN DISTRICT  
TALLAHASSEE, FLORIDA