L17000166174

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	
Certified Copies	Certificate	s of Status
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VESTOR OF CORFORATION
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COVER LETTER

	ion Section of Corporat	ions		∴etv
SUBJECT:	The	Minimalie	St Salon LLC imited Liability Company	
		Name of Li	imited Liability Company	
The enclosed Artic	des of Amen	dment and fee(s) are st	ibmitted for filing.	
Please return all co	orrespondenc	e concerning this matte	er to the following:	
		Brar	don Hilliard Name of Person	
	_	The	Minimalist Sa	<u>lon</u> 3
		8145	Tar Hollow D	<u>)e. </u>
	_	Gib.	Sonton FL 331 City/State and Zip Code	20001 -1 PH 12: 40
		Frenail address	to be used for future annual report notification	Xlon.Com
		ing this matter, please	call:	
Brand	Same of Perso	Illiard	at (<u>\$13</u>) <u>362 -</u> Area Code Daytime Telej	1666 phone Number
Enclosed is a check		_	,	
□ \$25.00 Filing I	řee 🗖	\$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)
_	address: tion Section of Corpor		<u>Street Address:</u> Registration Section Division of Corporat	ions
P.O. Box			The Centre of Tallah	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



November 6, 2020

BRANDON HILLIARD 8145 TAR HOLLOW DR. GIBSONTON, FL 33534

SUBJECT: THE MINIMALIST SALON, LLC

Ref. Number: L17000166174

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

This amendment was not filed because Thu T. Thach is not currently listed as a manager for The Minimalist Salon, LLC

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 020A00022281

JEARLD H QUICK OPS

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Mini	malist Salon, LLC	- 32 G
(Name of the Limited) (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	7.172 1.184 1.085
The Articles of Organization for this Limited Liab Florida document number <u>L1760C1C617</u>	Liability Company as it now appears on our records.) Florida Limited Liability Company) pility Company were filed on	0 7112: 40 ussigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of th	he limited liability company here:	
The new name must be distinguishable and contain the word Enter new principal offices address, if applicab (Principal office address MUST BE A STREET)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	2.\(\frac{1}{2}\)	
B. If amending the registered agent and/or regi agent and/or the new registered office address b	istered office address on our records, <u>enter the name of the n</u> here:	ew registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florala sucer address	
	, Florida	·

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.

H 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

Title	Name	Address	Type of Action
WGR	Thu T Thach		□∧dd
		8145 Tar Hollow De.	
		Gibbonton FL 33534	XRemove
			El Change
			🗆 Add
			□Remove
	·		□Add
			□Remove
			□Change
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(II an elfeet - <u>Note:</u> - If	ve date is li the date in:	sted, the di serted in	this block do	citic and canno	ne applicable stat	f filing or more than 90 day tutory filing requirement	optional) safter filing s. this date	2) Pursuant to 605,0207 (3)(E)
he record s ord is filed		đelayed e	ffective date.	but not an ef	fective time, at 4	2:01 a.m. on the earlier	of: (b) = TI	he 90th day after the
Dated	Sept	<u>em12e</u>	12 29	ih 2	030 2-/4	, ()\(
			Signati	ne or a plembe	r or authorized re	presentative of a member		
				Bro	LAGON For printed name	Hilliard	 -	

Filing Fee: \$25.00