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Tc:

Division of Corporations

Email Address:

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600 Phone

Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COVER LETTER

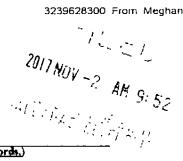
TO: Registration Se Division of Cor			
R2 TEX, I	LLC		
SUBJECT:	Name of Lim	ited Liability Company	
		, 252	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Cheyenne Moseley		
		Name of Person	
•	Legalzoom.com, Inc.		
		Firm/Company	
	101 N. Brand Blvd., 11t	h Floor	
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	neicied@hotmail.com		
For further information c	r-man address: (concerning this matter, please of	to be used for future annual report notifice	шоп)
Cheyenne Moseley		800 773-0888 ext.	
Name o	f Person	Area Code Daytime T	elephone Number
Enclosed is a check for the	he 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**



R2 TEX, LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company Florida document number <u>L17000213079</u>	were filed on 10/16/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Hair Safari 2, LLC	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7223 kadio Rd.
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34104
Enter new mailing address, if applicable:	7223 Radio Rd.
(Mailing address MAY BE A POST OFFICE BOX)	Naples, FL 34104
B. If amending the registered agent and/or registered o	
registered agent and/or the new registered office address her	
Name of New Registered Agent:	
Name of New Registered Agent:	Enter Florida street address
Name of New Registered Agent:	
Name of New Registered Agent:	, Florida City Zip Code

accept the obligations of my position as registered agent as provided for in Chapter 603, 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
Title	Name	Address	Type of Action
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			CI Remove
			
			
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			金属
			Add #
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read as follows:	
7223 Radio Rd., Naples, FL 34104	
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effective date must be specific, cannot be prior to date of receipt or filed date and	t cannot be more than 90 days after
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