## 117000 258835

(Req	uestor's Name)	
(AbbA)	ress)	
(Add	ress)	
(City)	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number)	)
Certified Copies	Certificate	s of Status
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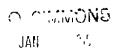
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## **COVER LETTER**

	ision of Corp			
SUBJECT:		Salon & SPA LLC		
3016H3		Name of Lim	ited Liability Company	
The enclosed	d Articles of :	Amendment and fec(s) are sub	mitted for filing.	
Please return	ali correspo	ndence concerning this matter	to the following:	
		Ninsiul Segovia Marquez		
			Name of Person	·
		Purple Rain Salon & SPA	LLC	
			Firm/Company	
		7405 Vista Way unit 4		
			Address	
		Bradenton Fl 34202		
		ninsiul@gmail.com	City/State and Zip Code	
			to be used for future annual report notif	lication)
For further i	nformation co	oncerning this matter, please ea	all:	
Ninsiul Seg	ovia Marquez	<i>y</i> .	305 3995513	
	Name of	f Person	at ()	e Telephone Number
Enclosed is:	a check for th	ne following amount:		
S25.00 I	filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed:	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional 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

Purple Rain Salon & SPA LLC				
( <u>Name of the Limi</u>	ted Liability Compa (A Florida Limited l	ny as it now appears ( Liability Company)	on our records.)	
The Articles of Organization for this Limited L	iability Company.	were filed on Flori	da	_ and assigned
Florida document number 1, 17000258835				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name (</u>	of the limited liab	ility company here	<b>:</b> :	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		10073 W Hillsbor	ough Ave Tampa Fl 336	
Principal office address MUST BE A STREET ADDRESS)			-	ت
Enter new mailing address, if applicable:		10073 W Hillsbor	ough Ave Tampa Fl. 336	
Mailing address MAY BE A POST OFFICE	BOX)			; •
	<del></del>			رخ. بند.
		· · · · · · ·		<u></u>
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	our records, <u>enter th</u>	e name of the
Name of New Neglstered Agent.	7.05.11		,	
New Registered Office Address:	7405 Visia Wa		a street address	
	David satura	1,70e7 1°10)/101		1
	Bradenton ————	City	Florida <u>34202</u>	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ninsiul Segovia Marquez	7405 Vista Way Unit 104 Bradenton FI 34202	
			□ Remove
		<u> </u>	☐ Change
MGR	Anisley Lanza		
		8809 W Hamilton Ave Tampa Fl 33615	■ Remove
			☐ Change
			□ Add
			رخ Remove
			□ Cljange
			□ \dil_3 22
			:2 Remove
			Change
			O Add
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			□ Change

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Tective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date. If the date inserted in this block does not meet the applicable statutory filing requirement of state's records.	_ (optional) ays after filing.) Pursuant to 605.020 rnts, this date will not be listed a
e record specifies a delayed effective date, but not an effective time, at 1. The 90th day after the record is filed.	2:01 a.m. on the earlier
ated 01/09/2019	
Signature of a member or authorized representative of a member	
Ninsiul Segovia Marquez	

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Filing Fee: \$25.00