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COVER LETTER

TO:	Registration Se Division of Cor			
V1210-0		arls Hair Salon, LLC		
SUBJ	P.C.1:	Name of Lim	ited Liability Company	
The er	oclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Jessica LeRoy		
			Name of Person	
		Curls & Pearls Hair Salon.	LLC	
			Firm/Company	
		1454 E. Michigan Street	Unit 7	
			Address	
		Orlando, FL 32806		
			City/State and Zip Code	
		curlsnpearls00@gmail.com		
		E-mail address: (to be used for future annual report notif	leation)
For lu	rther information co	oncerning this matter, please co	all:	
Jessie	a LeRoy		407 375-5402	
	Name o	Person	at ()	: Telephone Number
Enclos	sed is a check for th	ne following amount:		
≅ \$2	5.00 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

Curls & Planton (Name of the Limit	ded Liability Company as it now a (A Florida Limited Liability Company	ppears on our records.)	
The Articles of Organization for this Limited L Florida document number <u>L1800003</u>		n <u>02 12 20 8</u> and ass	igned
This amendment is submitted to amend the foll	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) on for this Limited Liability Company were filed on C2 12 20 8 and assigned L\800038327. ted to amend the following: ter the new name of the limited liability company here: isnable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." es address, if applicable: MUST BE A STREET ADDRESS) Solution EA POST OFFICE BOX) gistered agent and/or registered office address on our records, enter the name of the new the new registered office address here: STEFANIE SMITH 180 S. KNOWLES AVENUE, SUITE 9 Enter Florida street address		
A. If amending name, <u>enter the new name o</u>	f the limited liability compar	ny here:	
the new name must be distinguishable and contain the v	vords "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.	ī. C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREI	T ADDRESS)		. 0
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	SEP 10	VISION OF GOING
B. If amending the registered agent and registered agent and/or the new registered o	or registered office addres	29	हुँ हुई of the new
Name of New Registered Agent:	STEFANIE SMITH		
New Registered Office Address:	New Registered Office Address: 180 S. KNOWLES AVENUE, SUITE 9		
	Ente	r Florida street address	
	WINTER PARK	, Florida <u>32789</u>	
	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.

f 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	<u>Address</u>	Type of Action
AMBR	Jessica LeRoy	1454 E. Michigan Street GOOT 7 Orlando, FL 32806	= Add
			Remove
			Change
			Add
			□ Remove
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			□ Remove
			□ Change

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fective date, if other than the one fleetive date is listed, the date must stee. If the date inserted in this blocument's effective date on the De	be specific and cannot be prior to dock does not meet the applicable	ate of filing or more than 90 days	optional) after filing.) Pursuant to 605.020 , this date will not be listed a
record specifies a delayed The 90th day after the reco	effective date, but not and is filed.	n effective time, at 12:0	01 a.m. on the earlier o
September 6 ted	2018		
		→ 0	

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Typed or printed name of signee

Filing Fee: \$25.00