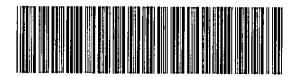
## L18000052248

(Ke	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Du	ainaga Eutit Ala-	
ud)	siness Entity Nar	nej
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
opecial instructions to	rining Onicer.	
•		
		j
<del></del> -		





200368925762

 $(\{0,1\},\{0,$ 





## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	DZ BARBER SHOP LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MARIANGELA S ROME	RO	
		Name of Person	
	MR BLENDZ BARBER S	HOP LLC	
		Firm/Company	
	6644 COLLINS AVENUE	:	
		Address	
	MIAMI BEACH, FL 3314	1	
		City/State and Zip Code	
	MARCELBLENDZ305@C	MAIL.COM  to be used for future annual report noti	(f
For firsther information o	encerning this matter, please c	·	nication)
	- ,	an.	
MARIANGELA S ROM	IERO	786 357-8440 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	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 Addres Registration 5		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Cor	rporations
P.O. Box 632	27	The Centre of T	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MR BLENDZ BARBER SHOP LI	.C		
(Name of the Limi	ted Liability Compa (A Florida Limited)	inv as it now appears on our reco Liability Company)	ords.)
the Articles of Organization for this Limited L lorida document number <u>L18000052248</u>	iability Company	were filed on <u>02/272018</u>	and assigned
his amendment is submitted to amend the following	owing:		
a. If amending name, enter the new name o	of the limited liah	oility company here:	
he new name must be distinguishable and comain the		lin Common lists Indianation M	I C" as the abbreviation W. I. C."
<u>-</u>		6644 COLLINS AVENUE	LC of the aboreviation L.L.C.
Enter new principal offices address, if applicable:		MIAMI BEACH, FL 33141	
Principal office address MUST BE A STREI	<u>et address)</u>		
Enter new mailing address, if applicable:		6644 COLLINS AVENUE	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		MIAMI BEACH, FL 33141	
			-1 -1
			رب
<ol> <li>If amending the registered agent and/or gent and/or the new registered office addre</li> </ol>		address on our records, <u>ent</u>	er the name of the new registe
gent and of the new regime, end office and			•
Name of New Registered Agent:	MARIANGELA S ROMERO		
New Registered Office Address:	6644 COLLIN	S AVENUE	
<del></del>		Enter Florida street ada	lress
	MIAMI BEAC	Ή	Florida 33141 Zin Code
		City	Zin 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, S gnature 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>	Address	Type of Action
<del></del>			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			DAdd
			∴ □Remove
		<del></del> -	□Change
			☐ Change ☐ Add
			 □Remove
			□ Change

		· · · · · · · · · · · · · · · · · · ·			<del> </del>
				-	
<del> </del>					<del></del>
				<del></del>	_
			_ <del></del> .		<del></del>
ective date, if other t	han the date of fili	JUNE 22, 2021		(optional)	
effective date is listed, the	e date must be specifie a	and cannot be prior to da		90 days after filing.) P	
e: If the date inserted in ument's effective date			statutory filing requi	rements, this date wi	If not be listed a
cord specifies a delayed	l effective date, but n	ot an effective time,	at 12:01 a.m. on the	carlier of: (b) The 9	Oth day after the
s filed.					· · ·
JUNE 22,		2021			
	1 1 0	_ ,			
ed John Za,					

Typed or printed name of signee