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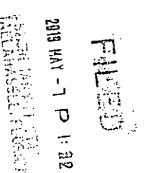
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WUENCEL IT



GEOFFREY P. BRODERSEN

gbrodersen@shellfleming.com

(850) 434-240 ext. (65)

Florida Department of State Division of Corporations Registration Section:

In RE: Woodbine Barber Lounge, LLC

5642 Woodbine Road

Pace, FL 32504

Please find enclosed the required documents for an Amendment to an LLC. I have also enclosed check # 13554 to cover the cost of the filing fee.

The daytime phone number is (850) 437-2411 ext. 141 to speak with Jennifer Godwin. The return address is Post Office Box 1831 Pensacola, FL 32591-1831. If you have any questions or concerns, please feel free to contact me.

Thank you for your time and consideration.

Sincerely,

Jennifer Godwin, Assistant to

Louis A. (Trip) Maygarden, III and

Geoffrey P. Brodersen

SHELL, FLEMING, DAVIS & MENGE, P.A.

226 Palafox Place, 9th Floor (32502)

Post Office Box 1831

Pensacola, FL 32591-1831 Phone: (850) 434-2411 ext. 141

Fax: (850) 435-1074

COVER LETTER

Registration Section Division of Corporations

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

TO:

WOODBINE SUBJECT: WOODBINE	BARBER LOUNGE, LLC ne Berber Laung Name of Lin	- 110	
3003ECT	Name of Lim	ited Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Evan	Name of Person Barber Lounge L Firm/Company	
	Woodbine	Barber Lounge L	12
	5642 W	lood hine Rd. Pace	\$
	Pen	Sacola STEL 3)5 City/State and Zip Code olf/Sgaar do Grafil to be used for future annual report notitie	504
-	E-mail address: (to be used for future annual report notific	cation)
For further information conc	cerning this matter, please ca	all:	
Pamela M Name of Po	CGehac erson	at (<u>770</u>) <u>56</u>] — 3	854 Felephone Number
Enclosed is a check for the t	ollowing 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	G ADDRESS:	STREET/COURIE	R ADDRESS:

Registration Section

Tallahassee, FL 32301

Division of Corporations
Clifton Building
2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WOODBINE BARBER LOUNGE, LLC (Name of the Limited Lial

(Name of the Limited Liability Company as it now appears on 1919 resorted.) | P 1: 92-

The Articles of Organization for this Limited Liabilit	y Company were filed on March 19:3018, SSLE: FECT and assigned
Florida document number L18000069977	,
This amendment is submitted to amend the following	z:
A. If amending name, enter the new name of the	limited liability company here:
The new name must be distinguishable and contain the words	Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AL	DDRESS)
Enter now mailing address of applicables	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new
Name of New Registered Agent:	Evan W Mcbehee
New Registered Office Address:	564) Vordbine RD Enter Florida street address
	Pace Florida 32571
_	City City Zip Code
New Davistanad Agent's Cignotum, if shanging Davist	anad Canat.

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
MGRM HII	HIEU V. NGUYEN	406 BELLE CHASSE WAY	□ Add
		PENSACOLA, FL 32506	■ Remove
			Change
MGRM EVAN MCGEHEE	EVAN MCGEHEE	5642 Vaudbine Rd	_■ Add
		564) Varbine Rd, 1910, FL, 32571 850-450-6489	□ Remove
			Change
			□ Remove
			Change
			□ Remove
			☐ Change
			🗆 Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			□ Change

_	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	4-24-2019. Evan Melha
	Signature of a member or authorized representative of a member
	Evan Mcbehee