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(Re	questor's Name)	·
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE

FILED

COVER LETTER

TO:	Registration Se Division of Cor			
CUD IE	Neenej Hair	& Beauty Bar LLC		
SUBJE	J1;	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Patricia Brewton		
			Name of Person	
		Neenej Hair & Beauty Bar	LLC	
		····	Firm/Company	
		1319 Sugar Maple Ln		
			Address	
		Brandon, FL 33511		
			City/State and Zip Code	
		neenejvc@gmail.com		
		E-mail address: (to be used for future annual report notifi	cation)
For furth	er information co	oncerning this matter, please ca	all:	
Patricia	Brewton		813 546-4759 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	e 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)

TO:

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

Neenej Hair & Beauty Bar LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 4/2/2018 and assigned Florida document number L18000083046 This amendment is submitted to amend the following: 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 ADDRESS) 1319 Sugar Maple LN Enter new mailing address, if applicable: Brandon, FL 33511 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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

If Changing Registered Agent, Signature of New Registered Agent

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 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	Patricia Brewton	1319 Sugar Maple Ln	∃ Add
		Brandon, FL 33511	Remove
			Change
MGR	2/11/migo	1319 Sugar Maple In Brandon, Fl 33531	Add
		Brandon, Fl 33531	Remove
			Change
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record specifies a delaye he 90th day after the rec		ate, but not	an effective	e time, at 12	2:01 a.m	. on th	e earlier
April 9	,	2018	_·				
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	Signature of a m	<u>رت</u> 	and son				

Page 3 of 3

Filing Fee: \$25.00