11800093958

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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COVER LETTER

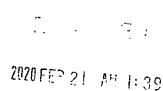
TO: Amendment Section Division of Corporations		
SUBJECT: How To Black Hair	LLC	
	Name of Surviving Par	ty
The enclosed Certificate of Merger and fee(s) are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to:	
Breanna Rutter		
How To Black Hair LLC		
Firm/Company		
3045 Newell Blvd		
Address		
Jacksonville, FL, 32216		
City. State and Zip Code		
Howtoblackhair.breannarutter@gma	il.com	
E-mail address: (to be used for future annua		-
For further information concerning this matter, plea	osa selli	
		5000
	<u>,517</u> ,243	5-3000
Name of Contact Person	Area Code	Daytime Telephone Number
☐ Certified copy (optional) \$30.00		
STREET ADDRESS:	MAILING AD	
Amendment Section	Amendment Sec	etion

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

CR2E080 (2/14)





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2020

BREANNA RUTTER 3045 NEWELL BOULEVARD JACKSONVILLE, FL 32216

SUBJECT: HOW TO BLACK HAIR LLC

Ref. Number: L18000092958

We have received your document and check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

As a condition of a merger, pursuant to s.607.1622(8), Florida Statutes, each party to the merger must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the articles of merger are submitted for filing.

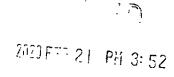
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 820A00002669

Articles of Merger For Florida Limited Liability Company



The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

TERS PRODUCTS LLC FL	LLC	
		
		
The exact name, form/entity type, and jurisdic	ction of the <u>surviving</u> party are as follows:	
Jurisdicti	on Form/Entity Type	
LACK HAIR LLC FL	LLC	
Jurișdictie	on Form/Entity Type	

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b). The Merger was approved by both parties.

FOUR	TH: Please check one of the be	oxes that appl	y to surviving er	tity: (if applicable)					
	This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record are attached.								
	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.								
	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.								
This entity is a foreign entity that does not have a certificate of authority to transact business in this mailing address to which the department may send any process served pursuant to s. 605.0117 and 6 Florida Statutes is:									
ss.605.	1006 and 605.1061-605.1072, F	.S. g. the delayed	effective date of	the amount, to which members a the merger, which cannot be prio f State:					
as the	document's effective date on the	Department (statutory filing requirements, this	date will not be listed				
<u>SEVE</u>	NTH: Signature(s) for Each Par	rty:		Typed or	Printed				
Name	of Entity/Organization:	S	Signature(s):	Name of Inc	lividual:				
How T	o Black Hair LLC		Genn	Breanna l	Rutter				
Mrs Ru	itters Products LLC		Gam	Breannar	utter				
Corpor	rations:			President or Officer nature of incorporator.)					
	al partnerships:	Signature o	f a general partn	er or authorized person					
	da Limited Partnerships: Signatures of all general partners								
	lorida Limited Partnerships: d Liability Companies:		f a general partn f an authorized p						
Fees:	For each Limited Liability Cor	npanv:	\$25.00	For each Corporation:	\$35.00				
	For each Limited Partnership:		\$52.50	For each General Partnership					
	For each Other Business Entity	7 :	\$25.00	Certified Copy (optional):	\$30.00				