

L18000 110935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

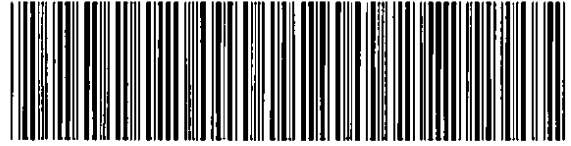
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J. HORNE
DEC 16 2024

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FILED
2024 NOV 18 PM 4:55
J. HORNE
DEC 16 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAYN BEAUTY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHMUEL AINSWORTH

Name of Person

Firm/Company

5301 NW 37TH AVENUE

Address

MIAMI, FL 33142

City/State and Zip Code

SHMULY@SAYN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHMUEL AINSWORTH

305

763-8867

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SAYN BEAUTY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2024 NOV 18 PM 4:55
CLERK OF CIRCUIT COURT
STATE OF FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/02/2018 and assigned
Florida document number L18000110935.

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:

5301 NW 37TH AVENUE

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33142

Enter new mailing address, if applicable:

5301 NW 37TH AVENUE

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33142

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:

SHMUEL AINSWORTH

New Registered Office Address:

5301 NW 37TH AVENUE

Enter Florida street address

MIAMI

City

Florida 33142

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.



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:

AKR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated NOVEMBER 12 2024

Filing Fee: \$25.00

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SAYN BEAUTY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2024 NOV 18 PM 4:55
CLERK OF STATE
FLORIDA

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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:

5301 NW 37TH AVENUE

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33142

Enter new mailing address, if applicable:

5301 NW 37TH AVENUE

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33142

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:

SHIMUEL AINSWORTH

New Registered Office Address:

5301 NW 37TH AVENUE

Enter Florida street address

MIAMI


Florida 33142

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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MGR = Manager

AMBR = Authorized Member

[illegible]

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated NOVEMBER 12 2024

SHIMUEL AINSWORTH

Filing Fee: \$25.00