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## **COVER LETTER**

TO:

Registration Section

Division of Corporations
SUBJECT: Beauty and The Bench, 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:
Christina Specos Name of Person
$ \frac{P0  Bo \times 19172}{\text{Firm/Company}} $
Firm/Company
Miami Beach FL 331 19 Address
Address
City/State and Zip Code CSTrainer 23 @ AUC. Cm
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christina Specos at (609) 320-0075  Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Status Service Solution See
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	2020	11.	
Beauty and the	submitted to amend the following:  Imme, enter the new name of the limited liability company here:  I COS Enterprises LLC  distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  all offices address, if applicable:  I AND WASHINGTON AVE.  I 191472  MIAMINE A STREET ADDRESS)  Address, if applicable:  AAY BE A POST OFFICE BOX)  BOX 191472  MIAMINE A COL FZ 33139  The registered agent and/or registered office address on our records, enter the name of the new registered new registered office address here:  New Registered Agent:  New			
The Articles of Organization for this Limited Liability Co Florida document number <u>L 18 仏 似 い 1 し</u>		on 7/10/	2 G 1 8 and assigned	
This amendment is submitted to amend the following:				
<del>-</del>			" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRI				- _ _39
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>Po</u> <u>mi</u>	Box i ami Bea	91472 CK FZ 33	<u>-</u> 39
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address or	ı our records, <u>enter</u>	the name of the new regis	<u>tered</u>
Name of New Registered Agent:	NA	- Shil	Christinas	<u>D</u> eros
New Registered Office Address:		nter Florida street addres	ss	
	. Florida			ation "LLC" or the abbreviation "L.L.C."  hington Ave.  472  Beach FL 33139  - 191472  By ach FZ 33139  ds, enter the name of the new registered  in 11 Chasta ach per as
	City		Zip Code	_
Now Degistered Agent's Signature, if changing Registered	Agent.			

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:

or removed	trom our records:		
MGR = M AMBR = A	1anager Authorized Member	n/A - Shir	stina Specos
<u>Title</u>	<u>Namę</u>	Address	Type of Action
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an effectiv lote: If t	date, if other than the date of filing:	
record sp Lis filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
	may 8, 2020	
ated	may 8, 2020	
ated	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00