48000179113

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

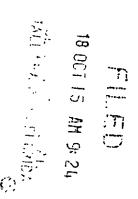
Office Use Only



400319455344

10/17/18--01050--016 ++25.00

RECEIVED OCT 1 5 2018



OCT 2 7 2018 T SCHROEDER

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	Betzy's Bea	auty Boutique, LLC		
obsect.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Bethzaida Young		
			Name of Person	
		Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. It correspondence concerning this matter to the following: Bethzaida Young Name of Person Firm/Company 10914 NW 8th Ct. Address Plantation, FL 33324 City/State and Zip Code dressyourmoodboutique@gmail.com E-mail address: (to be used for future annual report notification) ormation concerning this matter, please call: Ing Name of Person Area Code Daytime Telephone Number heeck for the following amount:		
	Firm/Company 10914 NW 8th Ct. Address Plantation, FL 33324 City/State and Zip Code dressyourmoodboutique@gmail.com E-mail address: (to be used for future annual report notification) formation concerning this matter, please call: ung at (
		Plantation, FL 33324	Address	Address iity/State and Zip Code L.com
		dressyourmoodboutique@g		
		E-mail address: (to be used for future annual report notif	ication)
For further in	nformation c	oncerning this matter, please ca	all:	
Bethzaida Y	oung		- 4 /	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	he following amount:		
■ \$25.00 F	iling Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

Registration Section

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

Betzy's Beauty Boutique, LLC		
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on o orida Limited Liability Company)	ur records.)
he Articles of Organization for this Limited Liabili	ty Company were filed on $\frac{07/25/20}{1}$	and assigned
lorida document number L18000179113		
his amendment is submitted to amend the following	g:	
. If amending name, enter the new name of the	limited liability company here:	
Polished mood, UC he new name must be distinguishable and contain the words		
he new name must be distinguishable and contain the words	'Limited Liability Company," the designa	• • .
inter new principal offices address, if applicables	<u>N/A</u>	
Principal office address MUST <u>BE A STREET Al</u>	DDRESS)	
		· on 7
		富工
nter new mailing address, if applicable:	N/A	
-	<u> </u>	524
Mailing address MAY BE A POST OFFICE BOX		
s. If amending the registered agent and/or registered agent and/or the new registered office	address here:	records, enter the name of the
Name of New Registered Agent:	A	
New Registered Office Address:	C	
	Enter Florida sti	reet address
		, Florida
	City	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
N/A	N/A	N/A 	□ Add
			□ Remove
			☐ Change
			Add
			EPRemove
			∑ □ Remove
			Change
		J	
			□ Remove
			☐ Change
			Add
			Remove
			Change
			□ Remove
			Change

· · · · · · · · · · · · · · · · · · ·			<u> </u>	
				
<u>. — </u>				
			27:	
				<u> </u>
		<u> =</u>		<u></u> ' <u>.</u>
				<u> </u>
				<u>φ</u> :
				F->
		<u>-</u> -	ا (۱۰ محل بهر ا حمل بهر ا (۱۲ م	
			1,,,	
	· · · · · · · · · · · · · · · · · · ·			
	N/A			
fective date, if other than the d	late of filing:	tiling or more than 90 days after	io nal) er filing.) Pursu	ant to 605.02
ote: If the date inserted in this bloc	ck does not meet the applicable statu	tory filing requirements, th	is date will no	ot be listed :
cument's effective date on the Dep	partment of State's records.			
record specifies a delayed The 90th day after the reco	effective date, but not an effort is filed.	ective time, at 12:01	a.m. on th	e earlier
October 09	2018			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00