

48000192221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

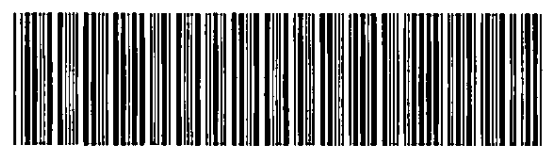
(Business Entity Name)

(Document Number)

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SEP 14 2020

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STATE OF MISSISSIPPI
DEPARTMENT OF REVENUE
1000 BANKERS BUILDING
JACKSON, MISSISSIPPI 39201

2020 SEP 14 PM 6:39

FILED

OCT 23 2020

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

NO LIMITS FASHION, I.L.C

SUBJECT: _____
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:

ALEXIS THOMPSON

Name of Person

NO LIMITS FASHION I.L.C

Firm/Company

3201 CYPRESS GROVE DRIVE

Address

HUSTIS FL 32736

City/State and Zip Code

BEAUTYSOLUTIONSSTUDIO@GMAIL.COM

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

For further information concerning this matter, please call:

ALEXIS THOMPSON

407 748-8440

Name of Person at (_____) _____
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**

NO LIMITS FASHION, LLC

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

FILED
2020 SEP 14 PM 6:39
STATE OF FLORIDA
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 8/17/2020 and signed
Florida document number L180001977221.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BEAUTY SOLUTIONS STUDIO LLC

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)

241 N HWY 1792

LONGWOOD FL 32750

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3201 CYPRESS GROVE DRIVE

EUSTIS FL 32736

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

_____, **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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	ALEXIS A THOMPSON	241 N HWY 1792	<input type="checkbox"/> Add
		LONGWOOD FL 32750	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JERRY HOWARD JR	3201 CPYRESS GROVE DRIVE	<input type="checkbox"/> Add
		EUSTIS FL 32736	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	AALIYAH JAYE HOWARD	3201 CYPRESS GROVE DRIVE	<input type="checkbox"/> Add
		EUSTIS FL 32736	<input checked="" 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"/> Change

