# 118000216702

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## **COVER LETTER**

TO:	Registration S Division of Co			
SUD IC		G USA COSMETICS, LLC		
SUBJE	cr:	Name of Lim	ited Liability Company	
The enc	losed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all corresp	ondence concerning this matter	to the following:	
		LEVI HATCH		
			Name of Person	<del></del>
		NIELSEN LAW GROUP		
			Firm/Company	<del></del>
		1490 S PRICE RD, STE 3	01	
		<del> </del>	Address	Y
-		CHANDLER, AZ 85286		,
			City/State and Zip Code	
		vara.joseluis@gmail.com	to be used for future annual report notifi	ication)
For fire	er information	concerning this matter, please o	•	·
LEVI H		contact and matter, pressed of	480 888-7111	 (
<del></del>	Name (	of Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for t	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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, Fl. 32301

# ARTICLES OF AMENDMENT TO ARTICLE: OF ORGANIZATION OF

HASHTAG USA COSMETIC, LLC (Name of the Limited Liab' aty Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on September 12, 2018 and assigned Florida document number \_L18000216702 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: (Principal office address MUST BE A STREET ADDRESS) 11 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

#### 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>	Address	Type of Action
MGR	ADMIR SERRANO	6187 NW 167TH ST	<b></b>
	<del></del>	UNIT H9	□ Add
		<del></del>	
		HIALEAH, FL 33015	
MGR	MARY SERRANO	6187 NW 167TH ST	
	· · · · · · · · · · · · · · · · · · ·	HALFALLEL 22015	
		HIALEAH, FL 33015	■ Remove
			Change
MGR	JOSE LUIS VARA	6187 NW 167TH ST	Add
	·	UNIT H9	
		HIALEAH, FL 33015	a Kenove
			Change
<del></del>			
			□ Remove
			Change
			Remove
			La.
			Change
			Add
			□ Remove
			Change

•	JOSE LUIS VARA
	ADMIR SERRANO
	ANDRES URDANGARIN DORRONSORO
•	MAIBY RASQUERI URDANGARIN
Des .	Sing data if ather than the data of Clina.
lf an ef Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	September 20 2018
Dateu	
	Signature of a member or authorized representative of a member
	LEVI HATCH

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Filing Fee: \$25.00

Typed or printed name of signee