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COVER LETTER

reconstruction of

TO:

Registration Section Division of Corporations

SHRIF <i>C</i> T:	21AN GOETZ SALON LLC
	Name of Limited Liability Company
The enclosed Ar	s of Amendment and fee(s) are submitted for filing.
Please return all	espondence concerning this matter to the following:
	LORMAINE GOETZ
	Name of Person
	BRIAN GOETZ SALON LLC
	Firm/Company
	32 S OSPREY AVE SUITE 103
	Address
	SARASOTA, FL BULLA 34236 City/State and Zip Code
	City/State and Zip Code
	INFO @ BEIANGOETZSALON · COM E-mail address: (to be used for future annual report notification)
lian filmban inda	on concerning this matter, please call:
roi iuruici iiiloi	on concerning this matter, please can.
LORPAIN	GOETZ at (941) 730 7209 me of Person Area Code Daytime Telephone Number
	me of Person Area Code Daytime Telephone Number
Enclosed is a ch	for the following amount:
□ \$25.00 Filin	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Divisi P.O. E	on Section Registration Section of Corporations Division of Corporations

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BILIAN	- -			<u> </u>	
(Name of the Lim	(A Florida Limit	npany as it now app ed Liability Compan	cars on our y)	records.)	
he Articles of Organization for this Limited I orida document number _ L 18 0002	Liability Compa	ny were filed on	SEPTEN	18en 17,	20° and assigned
nis amendment is submitted to amend the fol	lowing:				
Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 17, 2014 and assigned da document number L 18 000220941. amendment is submitted to amend the following: f amending name, enter the new name of the limited liability company here: ew name must be distinguishable and contain the words "Limited Liability Company." the designation "L.C." or the abbreviation "L.C." er new principal offices address, if applicable: cipal office address MUST BE A STREET ADDRESS) f amending address, if applicable: ling address MAY BE A POST OFFICE BOX) f amending the registered agent and/or registered office address on our records, enter the name of the new registered address here:					
ne new name must be distinguishable and contain the	words "Limited Li	ability Company," th	e designatio	n "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if appli	cable:				
rincipal office address MUST BE A STRE	<u>ET ADDRESS)</u>	<u> </u>			** `
				 .	<u>~~</u>
					O
nter new mailing address, if applicable:					
<u>lailing address MAY BE A POST OFFICE</u>	(BOX)	<u></u>			
		 			
0 0	ess here:		·	-	
Name of New Registered Agent:	Lorr	AINE 60	ETZ		<u></u>
New Registered Office Address:	32 5	OSPREY	AVE	SUITE	103
		Enter I	Torida street	address	
	- JARA	ISOTA		, Florida	34236 Zip Code
		City			гір Соае

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 Typ	oe of Action
MGR	LORPAINE GOETZ	32 5 OSPREY AVE SUITE 103	} Add
		SARASOTA, EL 34236]Remove
			Change
IMBR	BRIAN GOETZ	32 S OSPREY AVE SUME 1	o> ∃Add
		SARASOTA IFL 34236]Remove
			J Change
			∄Add
		<u></u>	n Remove
			3Change
			3'Add
]Remove
]Change
]Add
			Remove
			Change
			3 Add
			Remove
			1 Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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If an ef Note:	ctive date, if other than the date of filing:	unt to 605.0207 of be listed as
e recor rd is fi	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th of filed.	day after the
Dated	A A	
	Signature of a member or authorized representative of a member	

Typed or printed name of signee