118000226000

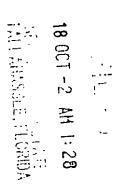
(Re	equestor's Name)	
DA)	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900319151449

10/02/18--01019--001 ++30.00



OCT 18 2018

COVER LETTER

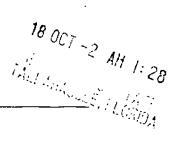
	ion of Corp			
SUBJECT: _		IR LOUNGE LLC		
3000CT			ited Liability Company	
The enclosed A	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ll correspor	ndence concerning this matter	to the following:	
		SEAN MYLES		
			Name of Person	
		-	Firm/Company	
		13866 MARINE DR		
			Address	
		ORLANDO, FL. 32832		
		SMYLES1978@HOTMAH		
		E-mail address: (to be used for future annual report notif	ication)
For further info	ormation co	ncerning this matter, please ca	all:	
SEAN MYLE			at () 3104022 Area Code Daytime	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a c	heck for the	e following amount:		
□ \$25.00 Fili	ing 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 ARTICLES OF ORGANIZATION OF



BLUSH HAIR LOUNGE LLC

(Name of the Limited Liability 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 24, 2018	and assigned
Florida document number L18000226000		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	y Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the name of the new
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	e to act in this capacity. I further agr	ee to comply with the

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	CAROLYN D CAMERON	13866 MARINE DR ORLANDO, FL. 32832	
		OREANDO, FE. 32832	■ Add
			Remove
			Change
			☐ Remove
			0 Ghange
			Add
			Remove 28
			Change
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			□ Remove
			☐ Change

		· · · · · · · · · · · · · · · · · · ·						
								
								
								
		· · · · · · · · · · · · · · · · · · ·	·					
								
					<u> </u>		-	
								 \$ 0€
							2- 2-	-2
			_				1.37 1.37	呈
							Lok	HH 1: 28
							<u>.</u>	
<u>.</u>								
. Effective dat (If an effective da Note: If the d document's ef	e, if other tha ate is listed, the da late inserted in t fective date on	te must be specifi his block does r	iling: c and cannot b not meet the	applicable sta	of filing or more th	(opti nan 90 days after quirements, this	onal) filing.) Pursu s date will no	ant to 605.0207 (ot be listed as th
the record sp) The 90th	pecifies a de day after the	ayed effective record is fil	ve date, bi ed.	ut not an e	ffective time	e, at 12:01 a	a.m. on th	e earlier of:
Dated		λ_{M}	·	·				
		Signature	of a member of	or authorized re	presentative of a	member	•	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00