## 1/8000235836

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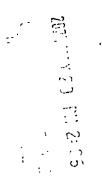
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## COVER LETTER

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TO: Registration So Division of Cor							
SUBJECT:	Palermo Name of Limi	Beauty Salon ited Liability Company	<u> 22C</u>				
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:					
	Sandra	Betan court Name of Person					
	SKy To	Name of Person  A Accounting Firm/Company					
	5206 US HWY 98 N						
		Address	<del></del>				
	LAKELAND FL 33809						
		City/State and Zip Code					
	sales@skynetprofit.com						
	E-mail address: (1	o be used for future annual report noti	lication)				
For further information e	oncerning this matter, please ca	ıll:					
SANDRA BETANCOURT		863 337-5989 at () Area Code Daytime Telephone Number					
Name o	f Person	Area Code Daytim	e Telephone Number				
Enclosed is a check for the	ne 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 Stafus & 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PALERMO BEAUTY SALON 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  $\frac{10/04/2018}{10}$ \_\_\_\_\_ and assigned Florida document number 1.18000235836 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 "LLC." 3800 US HWAY 98 NORTH Enter new principal offices address, if applicable: SUITE 292 (Principal office address MUST BE A STREET ADDRESS) LAKELAND, FL 33809 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: YESENIA MARTINEZ THACKERAY Name of New Registered Agent: 3800 US HWAY 98 NORTH STE 292 New Registered Office Address: Enter Florida street address LAKELAND

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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	FRANCES PALERMO	7929 ASHLEY POINTE DRIVE	
		LAKELAND, FL 33810	
			□Change
MGR	DAVID THACKERAY	818 N Lorri Ave.	<b>=</b> Add
		Lakeland FL 33815	
			□Change
MBR	YESENIA MARTINEZ	818 N Loni Ave.	<b>≣</b> Add
		Lakeland FL 33815	□Remove
			□Change
			□Remove
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