## 49000001875

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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D. BRUCE FEB 21 2019



February 2, 2019

SHAZMERE MCNEAL 2323 CENTENNIAL BLVD LEESBURG, FL 34748

SUBJECT: OOH LA LA WAX AND BROW LLC

Ref. Number: L19000001875

We have received your document for OOH LA LA WAX AND BROW LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Corporate Records Supervisor

Letter Number: 419A000023866: 18 PH 1:

### **COVER LETTER**

TO: Registration S Division of Co		•		
SUBJECT:		ax and Brow B	iar UC	
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Shazmer	M CN4al Name of Person		
	Browsand	CO. Brunty	BUL LLC	
	_2323 Cer	Hunnal Blvd Address		
	Leysburg F 1Brwandcobe	-L 34748 City/State and Zip Code au Kl Dar O J Uhva Cr	2019 Fast 8  Shark All Park  FALL AHASS	
For further information	E-mail address: () concerning this matter, please ca	to be used for future ahnual report notifi	cation)	ورين ا
Churme	c M (NU)	ar (40) 8001	7 836 Final Park 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/COURIER ADDRESS:

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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- Our care rung and Diory cas
(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 12/28/2018 and assigned Florida document number L1900001875.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:  1 BYWS & CD. BLUTK BCIV LL. (-
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  CYCINGC FC 32819
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  CESSburg FL 34748
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:  New Registered Office Address:
Or (andi) . Florida 328/9

#### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Change
		<del></del>	Remove
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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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Page 3 of 3

Filing Fee: \$25.00