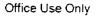
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2019 MAY 20 PR 50

JUN 5 2010 T. LEWIEUX

TO: Registration Section Division of Corporations SUBJECT: Don' + B' Shy! LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

Firm/Company

263 Fernandina 8+ NW

Address

Palm Bay FL 32907

City/State and Zip Code/

Latoyas taple and Com

E-mathaddress: (to be used for future annual report notification)

For further information concerning this matter, please call:

Latoya Staple at (929) 395 - 5601

Name of Person Area Code Daytime 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

OF + 'B' Shu! HOFILED

	Liability Company as it now appears on our records.) A Florida Limited Liability Company) 2319 HAY 20 P 12: 50
The Articles of Organization for this Limited Lia Florida document number £190000 =	bility Company were filed on Dec. 31 2018 and assigned TALLAHASSEE. His time?
This amendment is submitted to amend the follow	
A. If amending name, enter the new name of the state of the state of the state of the new name must be distinguishable and contain the world the state of the sta	the limited liability company here: Deauty Studio LLC rds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address on our records, enter the name of the n ce address here:
registered agent and/or the new registered offi	
registered agent and/or the new registered offi Name of New Registered Agent:	ce address here: Enter Florida street address
registered agent and/or the new registered offi Name of New Registered Agent:	ce address here:
registered agent and/or the new registered offi Name of New Registered Agent: New Registered Office Address:	Enter Florida street address , Florida
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Relative to the proper accept the obligations of my position as registered accept the obligations of my position as registered.	Enter Florida street address

Effective date, if other than the date of filing: (If an effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207. Note: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed. Dated May 14 2019 Signature of a gember or authorized representative of a member		
Effective date, if other than the date of filing:		
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The 90th day after the record is filed. Dated May 1H 2019	<u>Note:</u> If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
Attalia		
Attalia	Dated	May 14 2019
Signature of a member or authorized representative of a member		1 Autor

Page 3 of 3

Filing Fee: \$25.00