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FILED
2022 MAR 21 AM 9: 06
SECRETARY OF STATE

#### **COVER LETTER**

TO: Registration Se Division of Cor		
SUBJECT:	ACMUUS Bellity Company LLC Name of Limited Liability Company	
The enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	papiel Fre	
	Name of Person	
	Firm/Company	
	Address	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information c	concerning this matter, please call:	
Kala F	TPerson at (772) U31-3340 Area Code Daytime Telephone Number	-
Enclosed is a check for the	ne following amount:	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fe Certificate of Status	tatus &

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
Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILE

2022 MAR 21 AM

SECRETARY OF S TAELAHASSEE, FL

(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	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil Fallyn Beauty  The new name must be distinguishable and contain the words "Limited Liabil		
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	2-334 SW STM Prum city, Pl	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.U. Box 1867 Palm cit	1,FUA991
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	z 11)	гар с оше

#### 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	Type of Action
AMBR	Samantha Humer	2334 SW Stranberry Tev. Palm City IFL 34990	□Add
		Ter. Palm City IFL	Remove
		34990	□Change
17-7-1			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			🖸 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

## Page 2 of 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>
E. 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 (3)(1)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated March 12  Signature of a member or authorized representative of a member
Typed or printed name of signee

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Filing Fee: \$25.00