## L19000081744

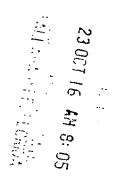
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Paradise Minimited Name of Limited	ent Skincare LLC	
The enclosed Articles of Amendment and fee(s) are submitted	ed for filing.	
Please return all correspondence concerning this matter to the	ne following:	
	Name of Person	
Paradise M	nomenta Skincare LLC	
5565.W. W	ndallo Rd.	
Port St L	ucil, FL 34953 ity/State and Zip Code	
Targela Wa E-mail address: (to be	e used for furnitary and report nonlication)	
For further information concerning this matter, please call:		
Tangela D. Walden Name of Person	at ( <u>772</u> ) <u>246 - 0950</u> Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,  Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)	
<u>Mailing Address:</u> Registration Section	<u>Street Address:</u> Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Paradise Momen	+z Skinc pany as it now appears on a ed Liability Company)	ave LLC.
The Articles of Organization for this Limited Liability Compare Florida document number <u>L_19000081744</u> This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited list		25 20 19 and assigned 5:
Paradise Momenty Be. The new name must be distinguishable and contain the words "Limited Lia Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	auty Bav ability Company." the design 556 S. W.	LLC ation "L.L.C." or the abbreviation "L.L.C."  Wordallo Road  Lucie, F134953
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	5565.W Port St 34953	Undallo Road Lucie, FL
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ee address on our recor	ds, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	treet address
	City	, Florida Zip Code

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 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>	? Name	Address	Type of Action
			□Add
		·	□Remove
			□Change
·	<del>.</del>		
			□Remove
			□Change
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		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			🗆 Add
		<del></del>	□Remove
			□Change
			□Add
			□Remove
			□ Change
	· · · · · · · · · · · · · · · · · · ·		□Add
			□Remove
			F149

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Add Additional Article:
Artisle VI:
The specific purpose for which this company is organized is:
this company is organized so:
De Provide Agrican natural hair
Alsvices (i.l. pais braiding and
Alreichs. (il hair braiding and Sisterlocks). Sell hair products
and skincare products.
<u> </u>
E. Effective date, if other than the date of filing: 10 9 2023 (optional)  (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)(b)  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 10/9/2023
Jangela J. Walder  Tangela D. Walder  Typed or printed name of signee
Tanada N (1) aldu
Typed or printed name of signee

Filing Fee: \$25.00