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COVER LETTER

TO: Registration Section Division of Corporation	ns	
SUBJECT: Staight	Edge Barbershop of Sarasota Name of Limited Liability Company	
The enclosed Articles of Amend	nent and fec(s) are submitted for filing.	
Please return all correspondence	concerning this matter to the following:	
<u>Y</u> .	DLEIda Pena Parra Name of Person	
_	Finn/Company	
2	860 Ringling Blud Address	
<u>So</u>	City/State and Zip Code YilleidaTenaTarrab 6 mail. Com E-mail address: (to be used for future annual report notification)	
For further information concerning		
JenniFer F Name of Person	Area Code Daytime Telephone Number	
Enclosed is a check for the follow	ing amount:	
-	0.00 Filing Fee &	

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

Barbershop of Scirusota LLC

imited 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 $\frac{5/9}{2019}$ and assigned Florida document number <u>L 19000118361</u> 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent: 2860 Ringling Blud

Etter Florida street address

Sarasota Florida 34237

Zip Code New Registered Office Address:

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.

M 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
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			☐ Remove
			☐ Change
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