10/17/2019



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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то:	Division of Corporations Fax Number : (850)617-6383		
From	: Account Name : KAYALI & CO., P.A Account Number : 120160000100 Phone : (813)899-9642 Fax Number : (813)899-9793	λ.	
**Ente	er the email address for this business annual report mailings. Enter only one	entity to be used for email address pleas	or future e.**
ļ	Email Address:		2011
	LLC AMND/RESTATE/CORREC QUE BEAUTY SUPP		IGN 23
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850-617-6381



October 21, 2019

## FLORIDA DEPARTMENT OF STATE Division of Corporations

QUE BEAUTY SUPPLY LLC 2001 E FLETCHER AVE TAMPA, FL 33612

SUBJECT: QUE BEAUTY SUPPLY LLC REF: L19000230669

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

All the pages in the amendment are black.

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) 245-6050.

Tracy L Lemieux Regulatory Specialist II FAX Aud. #: H19000309173 Letter Number: 119A00021677

P.O BOX 6327 - Tallahassee, Flonda 32314

ART	-	MENDMENT		
	TO	CANTZATION:		
ARTIC		GANIZATION		
	OF			
				···· j 2
QUE BEAUTY SUPPLY LLC			ا مسده ۲ ا	
(Name of the Limited	Liability Company	as it now appears on our re- bility Company)	cords.)	<b>_</b>
(1	A Florida Limited Lia	bility Company)	2019 OCT 23	₽ 1:29
		09/12/2019	1	
The Articles of Organization for this Limited Lia	bility Company w	ere filed on	(ALLAHAGE	assigned
Florida document number 119000230669			TAELAHAGGE	LECIOBA
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	<u>the limited liabili</u>	ty company here:		
The new name must be distinguishable and contain the wo	ude 11 ionited Liability	"Company" the designation "	"I.I.C" or the abbreviation	a "L.L.C."
The new name must be distinguishable and contain the wo	KGS CIMILED LIADUIL	y Company, the designation		
Enter new principal offices address, if applica	ible:	<u></u>		
(Principal office address MUST BE A STREET				
(Principal office adaress most be A STREET	ADDAL007		-	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>			
				· !
			and a set the pro-	the new
B. If amending the registered agent and/	or registered off	ice address on our rec	ords, <u>enter the ua</u>	
registered agent and/or the new registered of	lice address here			
Manual Allow Devictored Agents	MOHAMMED	HAMAYEL		
Name of New Registered Agent:				
New Registered Office Address:	2001E	. Fletcher AV	٩	
HACH INCERSIGNED CHILLE LOGICSS.		Enter Florida street d	address	
	Tamba.	ī.i	Florida 530	12
	141404	r -	Florida $-\mathcal{I}\psi$	1 server

ı.

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.

Çiry

Thanging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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
MGR	MOHAMMED HAMAYEL	2001 E. FLETCHER AVE. TAMPA, FL 33612	
		<u></u>	🖸 Add
		<del></del>	П Кстоус
			🖬 Change
			🖸 Add
			Remove
			Change
			🛛 Add
			Remove
			Change
<u></u>			🛛 Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			П Кетоус
			Change
	n.	a. 7 of 7	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 10-22, 2019
A.
Signature of a member or authorized representative of a member
K-LOHAMMED HAMAYEL
Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00