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JULIE COL

# **COVER LETTER**

TO:

	ration Sec on of Corp					
	AIRGENI	CA LLC.	•			
SUBJECT: _	. <u>.</u>	Name of Lim	ited Liability Company	<del></del>	<del></del>	
The enclosed A	rticles of A	Amendment and fec(s) are sub	mitted for filing.			
Please return al	l correspoi	ndence concerning this matter	to the following:			
		LEONID SMIRNOV				
			Name of Person			
		HAIRGENICA LLC.				
			Firm/Company		<del></del>	
		134 EMERSON AV.				
			Address		<del></del>	
		NOVATO, CA, 94949				
			City/State and Zip Code	2		
		leo@hairgenica.com				
For further info	rmation co	E-mail address: ( oncerning this matter, please co	to be used for future annua	al report notification)		
LEONID SMII		-	516 4	91-0360		
	Name of	Person	at () Area Code	Daytime Telepho	one Number	
Enclosed is a cl	neck for th	e following amount:				
<b>■</b> \$25.00 Fili	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is en		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ng Address stration S			Address:		
_		orporations		Registration Section Division of Corporations		
P.O.	Box 632	7	The Co	entre of Tallahas	ssee	
Talla	hassee, F	FL 32314	2415 N	N. Monroe Street	t, Suite 810	

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2025 - -3 5" 12: 28 HAIRGENICA, LLC. (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 October 09, 2019 and assigned Florida document number L19000254081 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) 134 Emerson Av. Enter new mailing address, if applicable: Novato CA 94949 (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: New Registered Office Address: Enter Florida street address \_, Florida \_ City

#### 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>	Name	<u>Address</u>	Type of Action
MGR	Leonid Smirnov	134 Emerson Av.	
		Novato, CA 94949	□Remove
			\bullet Change
AMBR	Fernando Tamez	1451 Brickell Av.	\ \ \
		Unit 2701	□Remove
		Miami FL 33131	🖺 Change
			□Add
			□Remove
			□Change
<del></del>	· · · · · · · · · · · · · · · · · · ·		□Add
		<del> </del>	□Remove
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			☐ Change
			□Add
			Remove
			□Change

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	We are changing from a MEMBER managed to a MANAGER managed LLC.
•	
•	
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lf an cf <u>Note:</u>	fective date, if other than the date of filing:  [fective 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 605.020  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dat-	5.29.30 2020
Dated	
	\ / /
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00