## L19000261103

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
	<u>.</u> :	
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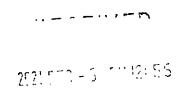
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T. MATTHEWS DEC 14 2021





## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 4, 2021

ROBIN BURTON 5728 MAJOR BLVD STE 501 ORLANDO, FL 32819

SUBJECT: MODERN BEAUTY BAR LLC

Ref. Number: L19000261103

We have received your document for MODERN BEAUTY BAR LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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.

Letter Number: 321A00026950

Tekayla T Matthews OPS

www.sunbiz.org

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## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: Modern	Reauty Bar I.I.C			
SUBJECT: MOGETH	Name of Limi	ited Liability Company		
The england Articles of A	Amendment and fee(s) are sub-	mitted for filing		
The enclosed Ardicies of F	emendment and ree(s) are sub-	initied for fining.		
Please return all correspon	dence concerning this matter	to the following:		
	Robin Burton			
		Name of Person		
	Baldwin Account	Firm/Company	-	<del></del>
	5728 Major Blvo	d., Ste 501		
		Address		
	20	010		
	<u>Orlando, FL 32</u>	City/State and Zip Code	••	
	Modernbeautvli	mited@gmail.co	om.	
	Modernbeautyli E-mail address: (	to be used for future annual	report notification)	
For further information co	oncerning this matter, please co	all:		
Robin Burton		at ( <u>407</u> )	363-0890	N1 L
Name of	Person	Area Code	Daytime Telepho	one Number
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing 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)
Mailing Address		Street A	ddress: ation Section	
Registration S Division of Co		<del>-</del>	on of Corporation	ons
P.O. Box 632	-		entre of Tallaha	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Modern Beauty Bar 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 v	vere filed on _	10/17/2	2019	_ and assigned
Florida document number <u>L19000261103</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company h	iere:		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the	designation "	LLC" or the abbr	eviation "L.L.C."
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 acagent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our			
New Registered Office Address:				
	Enter Fl	orida street aa	ldress	
	City		, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Civ			mp cour
I hereby accept the appointment as registered agent and agre				

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

	Nanager - Authorized Member	Address 21655-6 PHII: 10	
<u>Title</u>	<u>Name</u>	Address 21 DEC TO	Type of Action
MGRM	Brandon Williamson	9255 Doherty Place	[XAdd
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	21:11:10
	21 DEC -6 PHH: 10
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-	
Effective	date, if other than the date of filing: (optional) ive 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
Note: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
documen	t's effective date on the Department of State's records.
e record s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed	
Dutad	November 17, <u>2021</u> .
Dated	November 17, 2021
	SS 14 17 1
	Signature of a member or authorized representative of a member
	Ormanly Suarez
	Ormagly Suarez Typed or printed name of signee

Filing Fee: \$25.00