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Division of Corporations

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From:

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Account Number : I20010000122

: (239)659-3800

Phone

Fax Number

: (239)649-3410

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jmorey@bsk.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HIBISCUS BEAUTY VILLAGE, LLC

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COVER LETTER

TO: Registration S Division of Co	ection rporations			
Hibiscus (. •	
	Name of Lit	mited Liability Company		-
	Amendment and fee(s) are suitoned are suitoned and fee(s) are suitoned are suitoned are suitoned and fee(s) are suitoned are su			
	James F. Morey, Esq.			
		Name of Person		_
	Bond, Schoeneck & Kin	g, PLLC		
		Firm/Company		_
	4001 Tamiami Trail N.,	Suite 105		
		Address		_
	Naples, FL 34103			
	jmorey@bsk.com	City/State and Zip Code		_
For further information of	E-mail address: (oncerning this matter, please c	to be used for future annual report noti all:	fication)	
James F. Morey, Esq.		239 659-3800		
Name of	Person		e Telephone Numb	<u></u>
Enclosed is a check for th	e following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &

Mailing Address; Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hibiscus Beauty Village, LLC			
(Name of the Lim	ited Liability Company as (A Florida Limited Liability)	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited I	Liability Company were	filed on February 5, 2020	and assigned
Florida document number L20000034823	 .		and assigned
This amendment is submitted to amend the fol	lowing;		
A. If amending name, enter the new name of	of the limited liability o	company here:	2020 HA
The new name must be distinguishable and contain the	words "Limited Liability Con	mpany," the designation "LLC" or th	e abbreviation "I 1" "
Enter new principal offices address, if appli			. OT :
(Principal office address MUST BE A STREE	ET ADDRESS)		ÄH
	-		52
Enter new mailing address, if applicable:			• • •
(Mailing address MAY BE A POST OFFICE	BOX)		
			
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office addresss here:	ss on our records, enter the n	ame of the new registered
Name of New Registered Agent:	James F. Morey, Es	q.	
New Registered Office Address:	4001 Temiami Trail i	N., Ste. 105	
		Enter Florida street address	
	Naples	, Florida	34103
	Ci	in the second se	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 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

Title	<u>Name</u>	Address	Type of Action
MGR	George Vukobratovich	2950 N. Tamiami Trail, Suite 200	
		Naples, FL 34103	Remove
MGR	Richard Manfredi		□ Change
	Tichaid Mathiegi	2950 N. Tamlami Trail, Suite 200	□Add
		Naples, FL 34103	
MGR	Susan Vukobratovich		□Change
		2950 N. Tamiami Trail, Suite 200	
		Naples, FL 34103	□Remove
			□ Change
MGR	Kathy Manfredi	2950 N. Tamlami Trail, Suite 200	= Add
		Naples, FL 34103	□Remove
			DAdd HAR
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			□Remove
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be p iote: If the date inserted in this block does not meet the app ocument's effective date on the Department of State's recon	HCADIC STATUIOTY TO	(option of the contract of the	CU S IS	ant to 605,026 of he listed a
record specifies a delayed effective date, but not an effectivis filed.	e time, at 12:01 a.m	on the earlier of: (b)) The 90th	day after the
March				
2020				

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