L2000039499

(Re	questor's Name)	
(Ad	dress)	
DA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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APR 2 4 2020 S. YOUNG

COVER LETTER

TO: Registration Se Division of Cor			/ × ×				
	EAUTY, LLC		4				
Name of Limited Liability Company							
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspo	ndence concerning this matter	to the following:					
	Brian Kopelowitz, Esquire						
		Name of Person					
	Kopelowitz Ostrow						
		Firm/Company					
	One West Las Olas Bouley	ard, Suite 500					
		Address					
	Fort Lauderdale, Florida 3.	3301					
		City/State and Zip Code					
	kopelowitz@kolawyers.con	1 to be used for future annual report notif	ication)				
For further information c	oncerning this matter, please c						
Brian Kopelowitz		954 525-4100 at ()					
Name o	f Person		Telephone Number				
Enclosed is a check for the	he following amount:						
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Address Registration 9		<u>Street Address:</u> Registration Sec	rtion				
Division of C		Division of Cor	porations				

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

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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

MAKRO BEAUTY, LLC			92
		it now appears on our records.) ty Company)	APR II
The Articles of Organization for this Limited Lia	ability Company were	e filed on <u>02/03/2020</u>	and Assigned
Florida document number L20000039499			
This amendment is submitted to amend the follo			A 7:08
A. If amending name, enter the new name of	the limited liability	company here:	
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREE	ıble:	ompany," the designation "LLC" or	the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		
B. If amending the registered agent and/or reagent and/or the new registered office address		ess on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	Brian Kopelowitz, E	squire	
New Registered Office Address:	One West Las Olas I	Boulevard, Suite 500	
The registery of the remeds.		Enter Florida street address	
	Fort Lauderdale	, Floric	la ³³³⁰¹
		City	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mark Theodore	1722 Sheridan Street, #302	■Add
		Hollywood, Florida 33020	Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
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ective d	ate, if other the	han the date	of filing:	4/09/2020	data of tiling o	r mara than 00	(optiona	il) ng A Pursuant to a	605 A2A7
<u>te:</u> If th	e date inserted i	in this block do	es not meet	the applicat	date of fining of the statutory fi	ling requiren	ients, this da	ite will not be	isted as
cument s	effective date of	on the Departm	ient of State	s records.					
ecord sne	cifies a delayed	l effective date	hut not an	effective tim	e. at 12:01 a.r	n on the earl	ier of: (b)	The 90th day a	fter the
is filed.	orrice a doing on				-, <u>-</u>				
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	April	10,20		-	_·				
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Filing Fee: \$25.00