

L20 000046338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

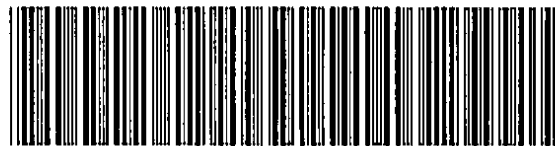
(Business Entity Name)

(Document Number)

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03/18/20--01010--009 **25.00

FILED
2020 MAR 16 PM 12:47
ALBRITTON

Amend

MAR 31 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAESO LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LINDA Hamilton
Name of Person

MAESO LLC
Firm/Company

13379 Key Lime Blvd
Address

West Palm Beach, FL 33412
City/State and Zip Code

Hydra @ H2O - Hydra Hair Care .com
E-mail address: (to be used for future annual report notification)
THE 444 ELO (NOT ZERO NUMBER)

For further information concerning this matter, please call:

LINDA Hamilton at (561) 398-4843
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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**

MAESO 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 2/2020 ^{2/10/2020} and assigned
Florida document number L20000046338.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Not Amending the Name N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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 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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

Title	Name	Address	Type of Action
MGR	Letitia "Tish" POPE	15127 LEICESTERSHIRE STREET WOODBRIDGE, VA 22191	<input checked="" type="checkbox"/> Add <u>CORRECT</u>
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Letitia GRAY		<input type="checkbox"/> Add
		Remove last NAME	<input checked="" type="checkbox"/> Remove
		NAME Change ONLY	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

N/A

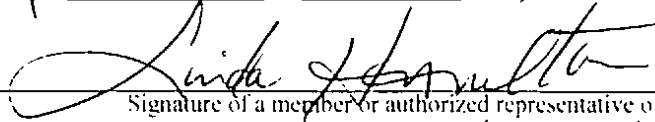
E. Effective date, if other than the date of filing: NO (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 3/13/2020 2020



Signature of a member or authorized representative of a member

LINDA HAMILTON

Typed or printed name of signee