

120 000130642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

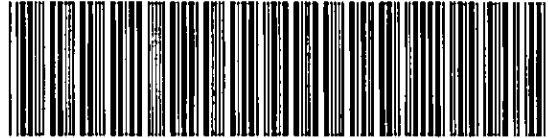
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 JUL -7 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FL

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JUL 08 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sepulveda Hair Studio
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:

DAVID Sepulveda
Name of Person

Sepulveda Hair Studio
Firm/Company

304 S. ORLEANS AVE.
Address

Deland, FL 32720
City/State and Zip Code

Sepulvedastyle@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Sepulveda at (386) 490-5274
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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

Sepulveda Hair Studio 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 5/14/2020 and assigned
Florida document number L20000130642

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 "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)

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SECRETARY OF STATE
TALLAHASSEE, FL

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:

DAVID SEPULVEDA

New Registered Office Address:

304 S. ORLEANS AVE

Enter Florida street address

DeLand

City

Florida

32720

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.

[Signature]
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>	<u>Address</u>	<u>Type of Action</u>
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MGR	Joseph F. Devlin III	304 S. ORLEANS AVE	<input type="checkbox"/> Add
		Deland, FL 32720	<input checked="" type="checkbox"/> Remove

MGR	DAVID SEPULVEDA	304 S. ^{ORLEANS} ORLEANS AVE	<input checked="" type="checkbox"/> Add
		Deland FL 32720	<input type="checkbox"/> Remove

			<input type="checkbox"/> Change
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2020 JUL - 7 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FL

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2020 JUL - 7 AM 10: 22
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TALLAHASSEE, FL


2028 JUL -7 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

(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)

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 July 1, 2022


Signature of a member or authorized representative

Signature of a member or authorized representative of a member

DAVID Sepulveda

Typed or printed name of signee

Filing Fee: \$25.00