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SEP 1 9 2020 S. YOUNG

COVER LETTER

TO: Registration Se Division of Cor						
GUD (DAY)	KING OF CUTS	S BARBERSHOP LLC				
SUBJECT:	Name of Lim	ited Liability Company	- 			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
		MENAR MONDELUS				
		Name of Person				
KING OF CUTS BARBERSHOP LLC						
Firm/Company						
	5876 AZALEA CIR					
	Address					
	WES	FPALM BEACH 33415				
	_	City/State and Zip Code				
		SBARBERSHOPT@GMAT				
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual re	port notification)			
MENAR MONDELL		561	9457869			
Name o	of Person	at ()Area Code	Daytime 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)	Sed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address: Registration Section		<u>Street Add</u> Registrat	I <u>ress:</u> ion Section			
Division of Corporations		Division	Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KING OF CUTS BARBERSHOP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Fillinga Emilie)	maonity Company)		
The Articles of Organization for this Limited Liability Compar	iv were filed on	05/27/2020	Sand assumed
Florida document number			- R. C.
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the design	nation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	 		
(Principal office address MUST BE A STREET ADDRESS)			
		<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our recor	ds, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida s	treet address	
		. Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent and as provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my s provided for in Chap	duties, and I am oter 605, F.S. Or,	familiar with and if this document is

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>	Name	<u>Address</u>	Type of Action
MGR	MENAR MONDELUS	5876 AZALEA CIR	□Add
		WEST PALM BEACH FL 33415	
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
	·		□Add
			□Remove
			□ Changa

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) LIUST WANT TO CHANGE MY TITLE FROM "P" TO "MGR". I'M TRYING TO OPEN A BUSINESS BANK ACCOUNT BUT I COULDN'T BECAUSE OF THE TITLE. THANK YOU E. Effective date, if other than the date of filing: (optional)

(If an effective date is fisted, 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. Signature of antemory of authorized representative of a member MENAR MONDELUS Typed or printed name of signee

Filing Fee: \$25.00