LZ0000197091

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



300348998203

07/27/20--01083--002 ++25.00

TANCHARY OF STATE

D. BRUCE SEP 16 2020

COVER LETTER

Division of C	Corporations	
SUBJECT:	Halo Mane LLC	
	Name of Limited Liability Company	
The enclosed Articles	of Amendment and fee(s) are submitted for filing.	
Please return all corres	espondence concerning this matter to the following:	
	Rachael Wilson	
	Name of Person	
	Halo Marl Firm/Company	_
	5601 Washington St. Apt 35	
	Hollywood FL 33023 City/State and Zip Code halo. mane of yahoo. com	<u> </u>
	halo mane @ yahoo com	_
For further information	E-mail address: (to be used for future annual report notification) on concerning this matter, please call:	E F. 2020 JUL 27 SEGNETATA TALLAHA
Rachael	Milson au 954, 294-2423	
Nam	ne of Person Area Code Daytime Telephone Nun	aber COST SE SE
Enclosed is a check fo	or the following amount:	76: 00 6: 00
\$25,00 Filing Fee	Certificate of Status Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	Diffing Fee, ficate of Status & fied Copy onal copy is enclosed)
<u>Mailing Addi</u> Registration		

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

Halo Mane	LLC	
(Name of the Limited Lability Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L2000197091</u> .	were filed on 07/09/208	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)	P.O. Box 8150- Hollywood F	15 133081
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, enter the na	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:		3
	Enter Florida street address Florida	
	City	Zip CON

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 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
AMBR_	Rachuel Wilson	5601 Washing ton St. Apt 35 Hollywood FL, 33023	XIAdd
		Hollywood FL, 33023	□Remove
			□ Change
			⊒Add
			□Remove
			□Change
	 		□Add
			□Remove
			_ □Change
			2020 Perhove
			Reflove
		(Y)	Rethove Grange Add
			⊐Add
			□Remove
			□Change
			⊐Add
			ПRетюve
			□Change

	<u>Can</u> y	w please	Rem	iove (CEO_	and	
place	(<u> </u>				as	the +	itle
for H	re compa	ny so 7	_ccm	goen	a	Pluzi	da
Bank	_	•		<u> </u>			
					_		
	·		_				
		<u> </u>				75 013 013	2020
							101
	<u> </u>			<u></u>		33.00	27
					,	<u> </u>	
		 .					8: 06
			-				
	-				<u> </u>		
tive date, if o	ther than the date	of filing:(07/09/6	2020	_ (option	al)	
If the date ins	serted in this block d	oesific and cannot be price oes not meet the appli	icable statutory f	or more than 90 d Illing requireme	avs after fil	ing.) Pursuant	to 605.0. oe listed
ment's effective	e date on the Departi	ment of State's record	S.				
ord specifies a d	lelayed effective date	e, but not an effective	time, at 12:01 a.	m. on the earli	er of: (b)	The 90th day	y after t
îled.							
1 <u> </u>	20th	2020	<u>)</u> .				
J	c/// .	////=					
	of acre	K 11 Wh	L	tive of a member			