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COVER LETTER

TO:	Registration Se Division of Cor	ction porations				
C11D #C7		HAIR, SKIN & BODY PRO	DUCTS LLC			
SUBJECT:						
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please re	turn all correspo	indence concerning this matter	to the following:			
		DELCHEIA TURNER				
			Name of Person	· · · · · · · · · · · · · · · · · · ·		
		PSYMPLE HAIR, SKIN	& BODY PRODUCTS LLC			
	Firm/Company					
	410 RONDEL COVE					
	Address					
	ORANGE PARK FL 32065					
			City/State and Zip Code	4-7-1		
		DELCHEIA@ICLOUD.CO				
For furth	er information c	E-mail address: (oncerning this matter, please c	to be used for future annual report no	iffication)		
	EIA TURNER	oneering and mater, preuse c	904 4133944			
Name of Person		at () Area Code Daytir	va Talanhaya Vombar			
	Name (r r crson	Mea Code Dayiii	не тенерионе маниет		
Enclosed	Lis a check for th	ne 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 Addres Registration 5		Street Address: Registration So	ection		
Division of Corporations		Division of Co	Division of Corporations			
P.O. Box 6327			The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

1248 - h F.112-33

PSYMPLE HAIR, SKIN & BODY PRODUC			
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now a Limited Liability Comp	appears on our records.) pany)	
The Articles of Organization for this Limited Liability Co. Florida document number 1.20000214045	ompany were filed o	on JULY 27,2020 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability compa	ny here:	
he new name must be distinguishable and contain the words "Limit	ed Liability Company.	"the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	410 RONI	410 RONDEL COVE	
Principal office address MUST BE A STREET ADDRI	ESS) ORANGE	PARK FL 32065	
	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:	410 RONI	410 RONDEL COVE	
Mailing address MAY BE A POST OFFICE BOX)	ORANGE	PARK FL 32065	
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on o	our records, enter the name of the new regis	
Name of New Registered Agent: DELCI	DELCHEIA TURNER		
New Registered Office Address: 410 RO	410 RONDEL COVE		
		er Florida street audress	
ORANG	GE PARK	Florida ³²⁰⁶⁵	
	Cuy	Zip Code	

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 - 1985 - Em 54,12, 33 Address Title Name Type of Action _____ □Remove _____ Change ______ 🗆 Add _____ □Remove _____ □Add _____ □Remove DAJd _____ □Remove _____ □ Change □Remove _____ Change ______ □ Change

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Tective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot	be prior to date of filing or re	Opti none than 90 days after	io nal) r tiling A Pursuant to 605 0207 <i>(</i> 3
ote: If the date inserted in this block does not meet the	applicable statutory filin	ig requirements, th	is date will not be listed as th
ocument's effective date on the Department of State's r	records,		
record specifies a delayed effective date, but not an effe	ective time, at 12:01 a.m.	on the earlier of: (I	o). The 90th day after the
is filed.			
ALC: 15			
ated AUG 15 2020	·		
Signature of a member	or authorized representative	of a member	
DELCHEIA TURNER			
*** ******			

Filing Fee: \$25.00