

L20000231638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

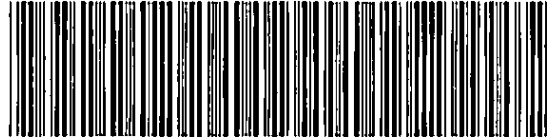
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2024 AUG 30 AM 8:55
FBI LABORATORY



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 30, 2024

MARIE-FLORE LEGENDRE
19046 BRUCE B DOWNS #1164
TAMPA, FL 33647

SUBJECT: MARFLORISH NAILS LLC
Ref. Number: L20000231638

We have received your document for MARFLORISH NAILS LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Rebekah Lefeavers
Regulatory Specialist III

Letter Number: 424A00016916

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Marlbrish Nails 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:

Marie-Flore Legendre
Name of Person

Firm/Company

19046 Bruce B. Downs Blvd # 1164
Address

Tampa, FL 33647
City/State and Zip Code

~~000000~~ Hello@marlbrish.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marie-Flore Legendre at (813) 743-6171
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**

Marflowish Nails 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 08/03/2020 and assigned
Florida document number L20000231638.

This amendment is submitted to amend the following:

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

Marflowish LLC

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)

19046 Bruce B Downs Blvd
1164 Tampa FL 33647

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19046 Bruce B Downs Blvd
Tampa FL 33647

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:

Marie-Flore Legendre

New Registered Office Address:

19046 Bruce B Downs Blvd

Enter Florida street address

Tampa

City

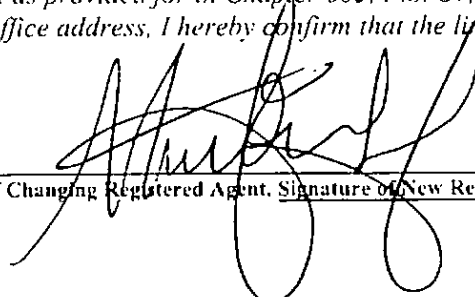
Florida

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.

If Changing Registered Agent, Signature of New Registered Agent



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2020 AUG 30 AM 8:55
CLERK OF THE COURT
HILLSBORO COUNTY, FLORIDA

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


[illegible]

[illegible]

(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.

08/22 2024



Signature of a member or authorized representative of a member

Marie-Flore Legendre

Typed or printed name of signee

Filing Fee: \$25.00