H2000002323244

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
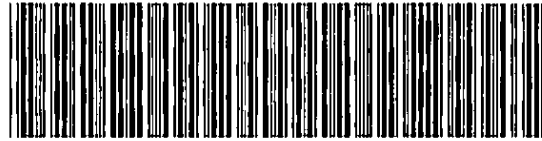(Document Number)

Certified Copies _____   Certificates of Status _____

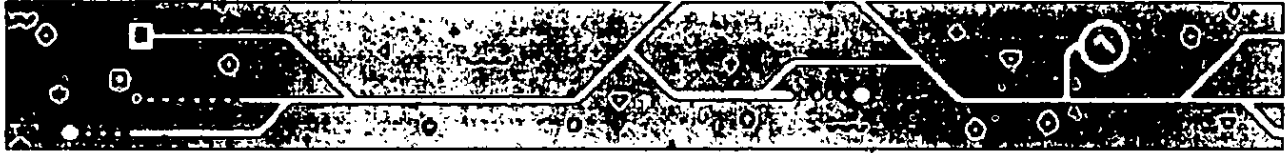Special Instructions to Filing Officer:

Office Use Only

zenbusiness

Jul 27, 2022

Florida Secretary of State
Division of Corporations
2415 N Monroe St Suite 810
Tallahassee. FL 32303

RE: **Beauty Boss Collection LLC**

To Whom It May Concern:

Attached please find the executed **Articles of Amendment.** for the above referenced.
Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed
below:

ZenBusiness Inc
Attention: Naketa Ford
336 E. College Ave, Suite 301
Tallahassee, FL 32301

If you have any questions. please feel free to contact me at 844-493-6249 or at
fulfillment@zenbusiness.com.

Thank you.

Naketa Ford
ZenBusiness Customer Success

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Beauty Boss Collection 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 L2000023234 _____.

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)

1317 Edgewater Dr

Suite #625

Orlando, FL 32804

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1317 Edgewater Dr

Suite #625

Orlando, FL 32804

FILED 2022 AUG -1 AM 11: 00 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: _____

New Registered Office Address: _____
Enter Florida street address

_____ , **Florida** _____
City   *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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Carissa Williams	1317 Edgewater Dr	☐ Add
		Suite #625	☐ Remove
		Orlando, FL 32804	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

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_____

_____

_____

_____

E. Effective date, if other than the date of filing: _____ **(optional)**
(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)
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.

Dated ___July 27_____ , ___2022_____ .

/s/Carissa Williams
_____
Signature of a member or authorized representative of a member

Carissa Williams
_____
Typed or printed name of signee