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Free Amendment
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COVER LETTER

Division of Corporations	
SUBJECT: Salvagee Bo	Earty LLC of Limited Liability Company
The enclosed Articles of Amendment and fee(s) as	re submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Errin	T.Bell
	Name of Person
	Firm/Company
1941 Bay	wind Ct
	Address
Tallaha	ssee, FL 32303
Savagee	City State and Zip Code City State and Zip Code City State and Zip Code Market State and Zip Code City State and Zip Code
For further information concerning this matter, ple	ease call:
Errin Bell	at (305) 922-6351
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fee Certificate of Sta	
Mailing Address: Registration Section	Street Address: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF Sovagel Beauty Company as it now applears on our records.) (Name of the Limited Liability Company as it now applears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Aug 7, 2020 and assigned Florida document number 2000 023 9714. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Swagel Beauty LC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) To light a SSelf, FL 32303

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent:

13727	Scu	152	St_	#814	
Man					

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:

New Registered Office Address:		
	Enter Florida street a	address
	City	

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, 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>	<u>Ad</u> dress	Type of Action
AMBR	Errin T. Bell	1941 Baywind Ct. Tallahassee, FL 3230	DAdd
		Tallahassee, FL 3230	B □Remove
			□Change
			🗆 Add
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11 21114	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	(optional) fective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
he reco ord is fi	rd 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 led.
Dated	March 90000 2021
	Signature of a member or authorized representative of a member
	Errin T. Bell

Filing Fee: \$25.00