120000 246301

(Re	equestor's Name)	
(Ac	(dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
	HODNE	
	J. HORNE	
J	IAN 2 4 2025	

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12/11/24--01011--001 **30.00



COVER LETTER

TO:

Tallahassee, FL 32314

	ration Sec n of Corp					
M SUBJECT:	VB MOS	T VALUABLE BARBERS B	ARBERSHOP, LLC			
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed Ar	ticles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all	correspor	ndence concerning this matter	to the following:			
		JEFFREY LEON MORAL	ÆS			
			Name of Person			
			Firm/Company			
	1139 NODDING SHADE DR.					
		Address				
		BROOKSVILLE, FL. 34604				
	City/State and Zip Code mvbbarbershop23@gmail.com					
			to be used for future annual report not	ification)		
For further infor	mation co	oncerning this matter, please co	all:			
JEFFRREY LEG	ON MOR	ALES	813 4451044 at ()			
	Name of	Person		ne Telephone Number		
Enclosed is a ch	eck for the	e following amount:				
☐ \$25.00 Filin	ng 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)		
	g Address		Street Address:	ation		
	tration S on of Co	ection orporations	Registration Se Division of Co			
	3ox 632		The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

		•	
	TO		
ARTICLES OF	ORGANIZATIO	N	_
	OF		and assigned
			100
MVB MOST VALUABLE BARBERS BARBER			<u> </u>
(<u>Name of the Limited Liability Cor</u> (A Florida Limi	npany as it now appears on led Liability Company)	our records.)	
	13/04/3	024	
ne Articles of Organization for this Limited Liability Compa	any were filed on 12/04/2	1024	and assigned 🕜
orida document number L20000246301			
is amendment is submitted to amend the following:			
If amending name, enter the new name of the limited li	iability company here:		
new name must be distinguishable and contain the words "Limited Li	ighility Conveyers "the decign	ation "I.I.C" ar the abb	rovigation "L. I. C."
, now make thus to distinguishable and contain the words. Elithied Li	and the design	anon LLC of the abou	e-mayon g.L.e.
iter new principal offices address, if applicable:			
rincipal office address MUST BE A STREET ADDRESS	<u> </u>		
ter new mailing address, if applicable:			
ulling address MAY BE A POST OFFICE BOX)			
ailing address MAY BE A POST OFFICE BOX)			
ailing address MAY BE A POST OFFICE BOX)			
	ce address on our recor	ds, <u>enter the name</u>	of the new register
If amending the registered agent and/or registered offic	ce address on our recor	ds, <u>enter the name</u>	of the new register
If amending the registered agent and/or registered offic	ce address on our recor	ds, <u>enter the name</u>	of the new register
If amending the registered agent and/or registered offic	ce address on our recor	ds, <u>enter the name</u>	of the new register
If amending the registered agent and/or registered officent and/or the new registered office address here: Name of New Registered Agent:	ce address on our recor	ds, <u>enter the name</u>	of the new register
If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our recor		of the new register
		treet address	of the new register
If amending the registered agent and/or registered officent and/or the new registered office address here: Name of New Registered Agent:			of the new register

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>	Address	Type of Action
MGR JOEY JAVIER LEON MOR.	JOEY JAVIER LEON MORALES	1139 NODDING SHADE DR.	
		BROOKSVILLE, FL. 34604	■Remove
			Change
			□Add
		 	🗆 Remove
			□ Change
			□Add
			□Remove
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			(IChange
			□Add
			□Remove
			□Change

11 2	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
<u>Not</u>	ective date, if other than the date of filing:
	cord 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 sfiled.
Dat	ed 12/04/24
-2 44	III.
	Fignature of a member or authorized representative of a member

Filing Fee: \$25.00