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Certified Copies	Certificates	s of Status
Special Instructions to f	Filing Officer:	

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## **COVER LETTER**

TO: Registration Se Division of Cor			
	UTY SUPPLY LLC.	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ISABEL YUSNEIDY CA	RRAZANA VEGA	
		Name of Person	
	NAY BEAUTY SUPPLY	LLC.	
	<del></del>	Firm/Company	
	27 NW 62ND CT		
		Address	<del></del>
	MIAMI, FL 33126		
		City/State and Zip Code	
	CARRAZANANIA376@G		
For further information c	E-mail address: ( oncerning this matter, please c	to be used for future annual report notil	fication)
ISABEL YUSNEIDY C		786 659 3255	
Name o	f Person	at ()	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Fiting 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		Street Address:	ari su
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632	27	The Centre of T	allahassee
Tallahassee, l	FL 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ipany as it now appears on our rec ed Liability Company)	ords.)
ny were filed on <u>SEPTEMBER</u>	and assigned
ability company here:	
ibility Company," the designation "L	.LC" or the abbreviation "L.L.C."
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Enter Florida street ada	lress
City	Florida Zip Code
	e address on our records, ent  SNEIDY CARRAZANA VEGA  Enter Florida street add

## 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 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>	Name	Address	Type of Action
MGR	Isabel Yusneidy Carrazana Vega	11115 SW 157TH TER MIAMI, FL 33157	■Add
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Note: If th	ate, if other to edate is listed, the edate inserted in effective date	in this block	does not n	neet the ap	plicable s	of filing or tatutory fil	more than 90 ing requires	(optio ) days after nents, this	onal) filing.) Pursu date will no	ant to 605,0207 ( of be listed as t
ne record spe ord is filed.	cifies a delayed	l effective da	ate, but not	t an effectiv	ve time, a	t 12:01 a.n	n, on the ear	lier of: (b)	The 90th	day after the
Dated Sep	tember 23rd			2020		$\bigcirc$				
Dated				•	 					
-		Sig	nature of a	member or a	uthoriz	efferentati	ve of a memb	ner	-	
	ISABEL YUSN	IEIDY CAR	.RAZANA	VEGA		_				

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