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S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Wescust Rame of	Darber Shop Limited Liability Company	n de de la companya d
The enclosed Articles of Amendment and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Wesly	Del Valle Serre	an.o
	cuts Barbersho	
60383 Sw 180	oth 51 Mani FL 3315	1
<u>Miami</u> Wescut	FL 33157 City/State and Zip Code 500110012. Com ess: (to be used for future annual report notific	ration)
For further information concerning this matter, plea		
Wesly Lu Name of Person	Area Code Daytime	For Sumber
Enclosed is a check for the following amount:		
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Statu		■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address: Romistration Spect	ion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

	3 DEC
(Name of the Limited Liability Co. (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Compa	any were filed on Sep. 28 2020 and assigned
Florida document number <u>L 200030426.2</u> .	$\frac{\omega}{\omega}$
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited leading to the leading to the limited leading to the limited leading to the limited leading to the leadin	shap ILC
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NLA
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1038	Su 180th St
<i>_</i>	Liami Storida 33157 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, 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
<u>_</u>			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
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			□Change
			□Add
			□Remove
			☐ Channer

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Just to Note that I'm the owner of
	Wes Cuts bushershop and only me Westy De walle is the Authorized personnal & owner
<u></u>	Jalusta is the hothers of Ores I
	of the 15 the 140 morrison personnal & Olinac
	1+ this Dussiness.
-	
-	
(If an effective Note: If t	date, if other than the date of filing:
the record specord is filed.	necifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	December 7/1 2020.
	Signature of a member or authorized representative of a member
	Typed or printed name of signer