

h20000306307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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WAIT

☐

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(Business Entity Name)

(Document Number)

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2022 JUL 25 PM 12:33

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Top of the line barber shop LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Martinez
Name of Person

Firm/Company

2598 Grande Valley Blvd Apt 6212
Address

Orange City, FL 32763
City/State and Zip Code

William.martinez.1980@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Martinez at (386) 956-6987
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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

Street Address:

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

FILED

2022 JUL 25 PM 12:33

Top of the line barber shop LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

CLERK OF CIRCUIT COURT
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 9/29/20 and assigned Florida document number L20000306307

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

William Martinez

New Registered Office Address:

2548 Grande Valley Blvd Apt #6212

Enter Florida street address

Orange City

City

Florida 32763

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Chayanne Garcia	1200 Integral Landings Dr	<input type="checkbox"/> Add
		#306	<input checked="" type="checkbox"/> Remove
		Orange City, FL 32703	<input type="checkbox"/> Change
AMBR	Julizza Sanchez	1200 Integral Landings Dr	<input type="checkbox"/> Add
		#306	<input checked="" type="checkbox"/> Remove
		Orange City, FL 32703	<input type="checkbox"/> Change
AMBR	William Martinez	2598 Grande Valley Blvd	<input checked="" type="checkbox"/> Add
		Apt #6212	<input type="checkbox"/> Remove
		Orange City, FL 32703	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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TALLAHASSEE, FL

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SECRETARY OF STATE
TALLAHASSEE, FL

(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)

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 19th, 2022.

James Scarsley
Signature of a member or authorized representative of a member

Julizza Sanchez
Typed or printed name of signee