L21000023730

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

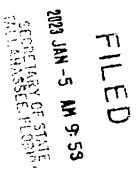
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LLC N/C Amena

01/05/29--01008- 005 **25.00



A. RAMSEY
MAR 15 TOLL

A. RAMSEY

MAR 15 6 .



IMPORTANT NOTICE

PLEASE SEND ALL DOCUMENTS – APPROVED OR REJECTED TO THE ADDRESS BELOW.

INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO:

PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

National Corporate Headquarters, Inc.

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Wednesday, December 28, 2022

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For HAIR BY KARINA, LLC

We have included payment in the amount of \$25.00-for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

COVER LETTER

	istration Sec ision of Corp					
SUBJECT:	HAIR BY	KARINA LLC		<u></u>		
	(-)/2-11-1	Name of Limit	ed Frability Company			
The enclosed	f Articles of A	imendment and fee(s) are suba	litted for filing.			
Please return	all correspon	dence concerning this matter to	o the following			
		Corporate Maintenance Lead				
			Name of Person			
		Proce	essing Department			
			ГитеСосорану			
		1	450 Vassar St			
			Address			
			Reno. NV 89502			
			City State and Zip Code			
				(contract)		
			in be used for future annual report notif	Catton		
For further i	information co	meerning this matter, please ea	ill;			
F	Process	ing Department	at (800) 638-2320 Area Code Daytima			
	Name o	t Person	Area Code Daytimo	: Telephone Number		
ti colona dan	a shoot for th	sa fallowina amount:				
		ne fellowing amount: \$\Boxed{\Boxesia} \\$30.00 \text{Filing Fee & }	□ \$55.00 Filling Fee &	☐ \$60.00 Filing Fee.		
☑ \$25 00	rang rec	Certificate of Status	Certified Copy radditional copy is enclosed:	Certificate of Status & Certified Copy (acdiminal copy is enclosed)		
	MAR	ING ADDRESS:	STREET/COURT	(ER ADDRESS)		
MAILING ADDRESS: Registration Section			Registration Section Division of Corporations			
	P.O. B	on of Corporations ox 6327	Clifton Building 2661 Executive Co			
	Tallah	assee, FL 32314	Tallahassee, FL 32	2301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2023 JAN -5 AM 9: 53

HAIR BY KARII		SECRETARY OF STATE TALLAHASSEE FLORING
(<u>Name of the Limited Liability Company a</u> (∧ Florida Limited Liabi	s it now appears on our re lity Company)	cords.)
The Articles of Organization for this Limited Liability Company well Florida document number L21000023730	re filed on <u>01/11/21</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
Essence Luxury S The new name must be distinguishable and contain the words "Limited Liability C	Salon, LLC Company," the designation '	"Li.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
_		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our rec	eords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress

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.

Cin

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 Title Name. <u>Address</u> Type of Action _D Add _____ Remove □ Add _____ 🗆 Remove _____

Change _____ D Remove _____ Change _□ Remove _□ Change _D Add _□ Remove _ Change bbA. 🗖 ☐ Remove

_____ □ Change

_	
_	
_	
<u>ite:</u> If	e date, if other than the date of filing: N/A (optional) tive date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 03 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at's effective date on the Department of State's records.
The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier to the cord is filed.
ted _	12/27/2022
	I_{ij}
	Signature of a member or anthorized representative of a member

Page 3 of 3

Filing Fee: \$25.00