

K21000033088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

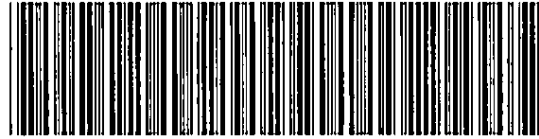
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2021 JUN 17 PM 12:54

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Khanichg

JUN 24 2021
ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boss, Nailz B, Cherry, 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:

Chandra Smith
Name of Person

18001 SW 127th Ave
Firm/Company
PO Box 1005
Address

Archer, FL 32118
City/State and Zip Code

~~Chandra Smith~~ justalawincandgrowing@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chandra Smith at (352) 949.1431
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input 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) |
|---|--|--|--|

Money order was already
sent. This is to correct the
form previously used

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

RECEIVED

APR 19 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2021

CHANDRA SMITH
P.O. BOX 1005
ARCHER, FL 32618

SUBJECT: BOSSI NAILZ BY CHERRY, LLC
Ref. Number: L21000033088

We have received your document for BOSSI NAILZ BY CHERRY, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

There's no record of a rejection sent on the above entity regarding submitting the wrong with the fee to file.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 021A00012288

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

Bossi Nailz By Cherry, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 01, 15, 2021 and assigned
Florida document number L21000633088.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Anything that Glows, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

18011 SW 127th Ave
Archer, FL 32618

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 1005
Archer, FL 32618

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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>
MGR	Avianrah Danzy	PO Box 1005, Archer, FL	<input checked="" type="checkbox"/> Add
		32618	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jordyn Smith	PO Box 1005, Archer	<input checked="" type="checkbox"/> Add
		FL 32618	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Email Address: justabwingandgrowing@gmail.com

Previously sent in incorrect form to
amend name of LLC. This is to correct
it. I've already sent in the money order

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 _____



Signature of a member or authorized representative of a member

Chandra Smith

Typed or printed name of signee