

121 000 181 561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

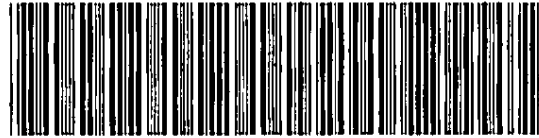
(Business Entity Name)

(Document Number)

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06/01/21--01037--029 **25.00

65015 1-1-2021

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIG Beauty Boutique 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:

Herby Gedeon
Name of Person

Firm/Company

2017 Villane Ave
Address

Orlando, FL 32212
City/State and Zip Code

HerbyGedeon@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Herby Gedeon
Name of Person

at (407) 527-4475
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing 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 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

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

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	Herby Gedeon	2217 Villano Ave	<input checked="" type="checkbox"/> Add
		ORlando, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lovely Bernard	2217 Villano Ave	<input type="checkbox"/> Add
		orlando, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DERRICK Gedeon	2217 Villano Ave	<input type="checkbox"/> Add
		orlando, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ELIGAH Bernard	2217 Villano Ave	<input checked="" type="checkbox"/> Add
		orlando, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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[illegible]

(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.



Herby Gedeon
Typed or printed name of

Typed or printed name of signee

Filing Fee: \$25.00