

To: -18506176383
10/12/21, 9:17 AM

Page: 1 of 5

2021-10-13 11:20:04 GMT

8155509948

From: JUAN ALBER

L21000278173

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : ALBER TAX ACCOUNTANT
Account Number : 120150000098
Phone : (305)713-9142
Fax Number : (815)550-9948

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ACC-ALBER@Hotmail.com

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A. LUNT

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KATHY LASHES STUDIO LLC

Electronic Filing Menu

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
2021 OCT 13 AM 10:17

(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 06/15/2021 and assigned
Florida document number L21000278173

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:

8208 MILLS DR.

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33183

Enter new mailing address, if applicable:

8208 MILLS DR.

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33183

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

City, **Florida** *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	PORTILLO, FRANCESCA	14915 SW 80 ST APT 207	<input type="checkbox"/> Add
		MIAMI, FL 33193	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ROA, LUIS E	8208 MILLS DR.	<input type="checkbox"/> Add
		MIAMI, FL 33183	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DOMINGUEZ, DANIEL	8208 MILLS DR.	<input type="checkbox"/> Add
		MIAMI, FL 33183	<input type="checkbox"/> Remove
			<input checked="" 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.)*

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DIVISION OF CORPORATION
2021 OCT 13 AM 10:17

E. Effective date, if other than the date of filing: 10/13/2021 (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.

(b) The 90th day after the record is filed.

Dated OCTOBER 13 2021

Signature of a member or authorized representative of a member

KATHERINE PORTILLO

Typed or printed name of signee