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August 16, 2021

Registration Section
Division of Corporations
2415 N. Monroe St., Suite 810
Tallahassee, FL 32303

RE: Salted Beauty Co, LLC

To whom it may concern:

The Enclosed Articles of Amendment and Fee(s) are submitted for filing. Also, please find enclosed a check for state filing fees in the amount of \$55.00 made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addressed stamped envelope included.

Sincerely,

Amanda J. Beren, Document Processor

CorpNet, Incorporated 888-449-2638 Ext. 105 filings@corpnet.com



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SALTED BEAUTY CO, LLC		
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number L21000295524		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation # L. C."
Enter new principal offices address, if applicable:	6 N Boulevard of the Presidents	: :
(Principal office address MUST BE A STREET ADDRESS)	Sarasota, FL 34236	
		<u>ن</u>
Enter new mailing address, if applicable:	6 N Boulevard of the Presidents	٠. س
(Mailing address MAY BE A POST OFFICE BOX)	Sarasota, FL 34236	
· · · · · · · · · · · · · · · · · · ·		
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	ffice address on our records, <u>enter</u> e:	the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	_
	, Florida	
	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>	Type of Action
AMBR	AMANDA SOWA	6 N Boulevard of the Presidents	
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If the date inserted in this block does not meet the applic	able statutory filing requirements, this date will not be listed
nent's effective date on the Department of State's records.	•
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cord specifies a delayed effective date, but no 90th day after the record is filed.	ot an effective time, at 12:01 a.m. on the earlier
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8/13/21	
	<i>†</i>
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Signature of a member or author	orized representative of a member
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Page 3 of 3

Filing Fee: \$25.00