## L21000308053

(Requestor's Name)
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- Inches
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(
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(Document Number)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

US 12/22/23



September 9, 2023

MARIAH BASS 2875 S. ORANGE AVE SUITE 500 #6545 ORLANDO, FL 32806

SUBJECT: MOBB ENTERPRISES LLC

Ref. Number: L21000308053

We have received your document for MOBB ENTERPRISES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Letter Number: 523A00020715

Yvette Scott Supervisor

www.sunbiz.org

## COVER LETTER

Division of Corporations		
SUBJECT: Mobb Enter	CRORISES LLC mited Liability Company	
The enclosed Articles of Amendment and fee(s) are su	bmitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
<u>Mar</u>	Name of Person	
	ona Hair Compan	·
	S Orange Ave	STE 500# 6545
	O FL 328060 City/State and Zip Code	
<u>Sellaluna</u> E-mail address:	hairco <u>e icloud.</u> Co	om SECRETION DIVISION DEC
For further information concerning this matter, please	call:	FILE DEC 22
Mariah Bass Name of Person	at (407) 716 - Area Code Daytime	2112 e Telephone Number
Enclosed is a check for the following amount:		
\$25.00 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	Street Address: Registration Sec Division of Cor	
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P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	rprises LLC
(Name of the Limited Liability Compan (A Florida Limited L.	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L_2\000308053</u> .  This amendment is submitted to amend the following:	were filed on $07  00 202$ and assigned
-	
A. If amending name, enter the new name of the limited liabil	11.0
Bella Luna Hair The new name must be distinguishable and contain the words "Limited Liabili	ty Company "the designation / LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:	2875 5 Orange Ave STE 500 #6595
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32806
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	1875 5 Grange Ave 5 500 #6545  Orlando, FL 32806 E STREE  22 CREET TO STREET
	riah Bass
New Registered Office Address: 2875 5	Orange Ave STE 500 #6545 Emer Florida street address
^	City Florida 32806 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
Trat	Mariah Bass	2875 5 Change Ave SES	#6545 00   OAdd
		2875 S Change Ave Stes Orlando, FL 32800	□Remove
			Change
			🗆 Add
			□ Remove
			□Change
			SEERE TARTE
			FILED VERY STATE OF CORPORATIONS Remove
			□ Change
			□Add
			🗀 Remove
			□ Change
			□ Add
			□Remove
			Change

## Page 2 of 3

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	Want to make Sure all addresses For
	mailing address principal address, legistered
	mailing address, principal address, legistered agent address and authorized person address
_	are 2875 J. Orango Mre STE 500 #6545 Orlando, FZ 32800
_	Change title From President to Owner
_	
_	
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_	<b>22</b> 00 00 00 00 00 00 00 00 00 00 00 00 00
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(If an effe Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	August 12, 2023.
	Signature of a member of authorized representative of a member
	Mariah Bass
ivaccu <u>-</u>	Signature of a member of authorized representative of a member    Cariah Bass   Typed or printed name of signee