

# L21000513247

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

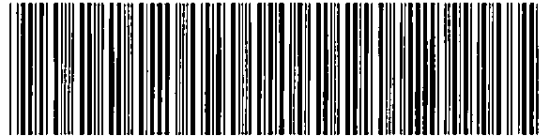
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE GREAT AMERICAN BARBERSHOP 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:

JOSE PLASENCIA ALBERTO

\_\_\_\_\_  
Name of Person

THE GREAT AMERICAN BARBERSHOP LLC

\_\_\_\_\_  
Firm/Company

2124 JAMES I. REDMAN PARKWAY

\_\_\_\_\_  
Address

PLANT CITY, FL 33563

\_\_\_\_\_  
City/State and Zip Code

GreatAmericanBarbershopLLC@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE PLASENCIA ALBERTO

407 929-9269  
at ( )

\_\_\_\_\_  
Name of Person

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



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DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FL

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

THE GREAT AMERICAN BARBERSHOP 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 December 3, 2021 and assigned  
Florida document number 121000513247.

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 "LLC."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**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:

JOSE PLASENCIA ALBERTO

New Registered Office Address:

2124 JAMES L REDMAN PARKWAY

*Enter Florida street address*

PLANT CITY

Florida 33563

*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.*

*Jose Plascencia Alberto*

Changing Registered Agent, Signature of New Registered Agent



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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	BRENDA PARKER	2124 JAMES L REDMAN PARKWAY	<input type="checkbox"/> Add
		PLANT CITY, FL 33563	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JOSE PLASENCIA ALBERTO	2124 JAMES L REDMAN PARKWAY	<input checked="" type="checkbox"/> Add
		PLANT CITY, FL 33563	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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**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.

Dated November 8 2024

x Brenda Parker

Signature of a member or authorized representative of a member

BRENDA PARKER

Brenda Parter

Typed or printed name of signee

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2024 NOV 15 AM 9:52  
90th day after the  
CLERK OF STATE  
TALLAHASSEE FL