## K22CCC044113

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Decament Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



300388932743

06/10/22--01018--007 \*\*30.00

TALLADASSEE, FLORIDA

AUG 2 5 7027 S. PRATHEI

## **COVER LETTER**

TO:

Tallahassee, FL 32314

	Registration Sec Division of Corp				
SUBJEC		TYLES LLC			
SUBJEC		Name of Lim	ited Liability Company		<del>-</del>
The enclo	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please ret	um all correspoi	ndence concerning this matter	to the following:		
		MIGUEL M MENDOZA			
			Name of Person		<del></del>
			Firm/Company		<del></del>
		1139 TIMBERBEND CIR	CLE		
			Address		
		ORLANDO, FLORIDA, 3	2824		
		MGMENDO@AOL.COM	City/State and Zip Code		<del></del> -
		E-mail address: (	to be used for future annual i	report notificat	ion)
For furthe	r information co	oncerning this matter, please ca	all:		
MIGUEL	M MENDOZA		407 538	1-7487	
	Name of	Person	Area Code	Daytime Te	lephone Number
Enclosed	is a check for th	e following amount:			
□ \$25.0	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl		■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Ad		_
	Registration S Division of Co		_	ition Section of Corpor	
	2 O. Box 632			itre of Talls	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MY WAY STYLES LLC		JUN 10
	ty Company as it now appears on our records.) a Limited Liability Company)	M TO PM
The Articles of Organization for this Limited Liability C Florida document number L22000044113		and assigned.
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
REGIAS LLC		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDR  Enter new mailing address, if applicable:	RESS)	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida _	Zip Code
· <del>-</del>	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.

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
	<u> </u>		□ Add
			□Remove
			Change
			□Add
			□ Remove
			□ Change
			□Add
			□Remove
			□ Change
			□ Remove
			[]Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

	· · · · · · · · · · · · · · · · · · ·			
		<del></del>		<del></del>
·			<u> </u>	
<del>4 - 7 - 1</del> - 1				
-				
<u></u>				
fective date, if other than the d in effective date is listed, the date must be ote: If the date inserted in this bloc cument's effective date on the Dep	oe specific and cannot be prior to k does not meet the applical	o date of filing or more the ble statutory filing req	(optional) an 90 days after filing uirements, this date	) Pursuant to 605.020 will not be listed a
ecord specifies a delayed effective	date, but not an effective tin	ne, at 12:01 a.m. on th	e earlier of: (b) Th	e 90th day after the
is filed.				
is filed.	2022	*		2022 J
is filed.	2022 wis	<u> </u>		2022 JUN 1
is filed.  JUNE 3	2022	ized representative of a	member	2022 JUN 10 PH