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E T E

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

	Hair Design LLC		•	
SUBJECT:	Name of Lim	ited Liability Company	÷	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Curt Fritzeen			
	Name of Person			
	Callicarpa Salon			
	·	Firm/Company	_	
	219 E. Highland Blvd.			
		Address	_	
	Inverness, FL 34452			
		City/State and Zip Code	2027 SEL	
eallicarpahairdesign@gmail.com			SEI SEI	
For further information c	E-mail address: ( oncerning this matter, please c	to be used for future annual report notification) all:	2022 SEP 26 PM 3: 09 SECRETARY OF STALLANDA SEE TALLANDA SEE THE	
Curt Fritzeen		352 601-7038 at ( )	PA G	
Name o	f Person	Area Code Daytime Telephone Number	r F 6	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres Registration S Division of C	Section	Street Address: Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Callicarpa Hair Design LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number L2200008416	y were filed on February 21, 2022	and assigned
This amendment is submitted to amend the following:		
ms afficient is submitted to afficient the following.		
A. If amending name, enter the new name of the limited lia	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" of	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	with an investigated about	<del></del>
Principal office address MUST BE A STREET ADDRESS)		150 S
		SEP 2
		一類の
inter new mailing address, if applicable:		700 3
Mailing address MAY BE A POST OFFICE BOX)		Mon ex
	trible to the State of the Stat	-1 <b>6</b>
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, enter the	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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 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>	Address	Type of Action
			□Remove
			☐ Change
			□Add
			Remove
			Change
	<del></del>		□Add
			SEGRETALY OF STATE
			☐ Remove ☐ Change
			□Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) In order for checks to be written out to my business' fictitious name, Callicarpa Salon, Brannen Bank of Inverness requires the owner's name who is me, Curt Fritzeen, be amended to Callicarpa Hair Design LLC. 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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated September 21 Signature of a member or authorized representative of a member Curt Fritzeen

Typed or printed name of signee