

122000 117591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2022 OCT 17 PM 3:31

COVER LETTER

Name :

Tilcia Cabiedes

Phone Number :

848-242-9990

Email :

[Tcabiedes@hotmail.com](mailto:Tcabiedes@hotmail.com)

Return Address:

5755 Monterra Club Dr.

Lake Worth, FL 33463

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TK COLORS 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:

TILCIA CABIEDES

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

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

5755 MONTERRA CLUB DR.

\_\_\_\_\_  
Address

LAKE WORTH, FL 33463

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

TCABIEDES@HOTMAIL.COM

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

For further information concerning this matter, please call:

TILCIA CABIEDES

848 242-9990  
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

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

TK COLORS 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 03/08/2022 and assigned  
Florida document number L22000117591.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

#1 Precious-Nails LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

5755 Monterra Club Dr.

(Principal office address MUST BE A STREET ADDRESS)

Lake Worth FL 33463

Enter new mailing address, if applicable:

5755 Monterra Club Dr.

(Mailing address MAY BE A POST OFFICE BOX)

Lake Worth FL 33463

**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:

Tilcia Cabiedes

New Registered Office Address:

5755 Monterra Club Dr.

*Enter Florida street address*

Lake Worth

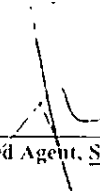
*City*

Florida 33463

*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>	<u>Type of Action</u>
MGR	Tilcia Cabiedes	5755 Monterra Club Dr. Lake Worth FL 33463	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Kevin Plinto	4251 Waterway Dr. Lake Worth, FL 33464	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

Signature of a member or authorized representative of a member

TILIA CARRIEDAS  
Typed or printed name of signee