

L22000 19012S

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

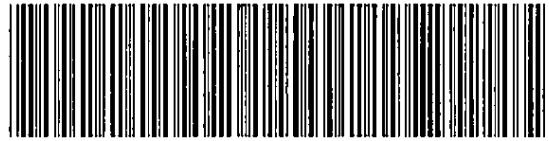
(Business Entity Name)

(Document Number)

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9501 JUN 25 PM 11:03  
STATE OF TEXAS  
COMPTROLLER OF PUBLIC ACCOUNTS

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THE BEAUTY CENTER LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fect(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SCARLETH E MONTALVAN  
Name of Person  
THE BEAUTY CENTER LLC  
Firm/Company  
830 NW 87th AVE. # 401  
Address  
MIAMI FL 33172  
City/State and Zip Code  
SCARLETH215@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

2024 JAN 25 AM 11:04  
SECRETARY OF STATE

For further information concerning this matter, please call:

SCARLETH E. MONTALVAN      786      281 - 2412  
Name of Person      at (      )      Daytime Telephone Number  
Area Code

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**

THE BEAUTY CENTER 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 APRIL 21, 2022 and assigned Florida document number L22000190125.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2232 NW 87th AVE

DORAL FL 33172

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

18861 NW 78th PLACE

HIALEAH FL 33015

**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:

ALBY'S TAX ACCOUNTING LLC/ALBA MARTINEZ

New Registered Office Address:

4242 N FEDERAL HWY SUITE F,

*Enter Florida street address*

FORTH LAUDERDALE

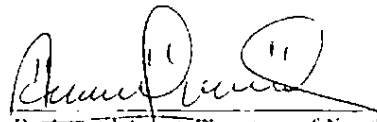
Florida FL 33308

*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>	<u>Address</u>	<u>Type of Action</u>
MGR	MARIANA L. FRONTADO	10925 W. 32nd LANE	<input type="checkbox"/> Add
		HALEAH FL 33018	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NORA N. GIULIANI	18861 NW 78th PLACE	<input checked="" type="checkbox"/> Add
		HALEAH FL 33015	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

ON JANUARY 22ND 2024, IN THE CITY OF MIAMI, STATE OF FLORIDA  
MARIANA FRONTADO SOLD HER 50% PARTICIPATION OF "THE BEUATY CENTER LLC"  
TO NORA N. JULIANI, PAID BY CHECK ON SAME DAY OF THE TRANSACTION.

2024 JAN 25 11:06 AM  
SECRETARY OF STATE  
FLORIDA

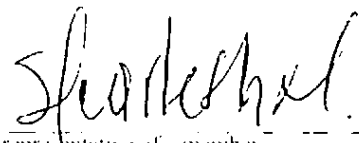
**E. Effective date, if other than the date of filing: JANUARY 23, 2024 (optional)**

(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)

**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 JANUARY 24 2024



Signature of a member or authorized representative of a member

SCARLETE MONTALVAN

Typed or printed name of signer