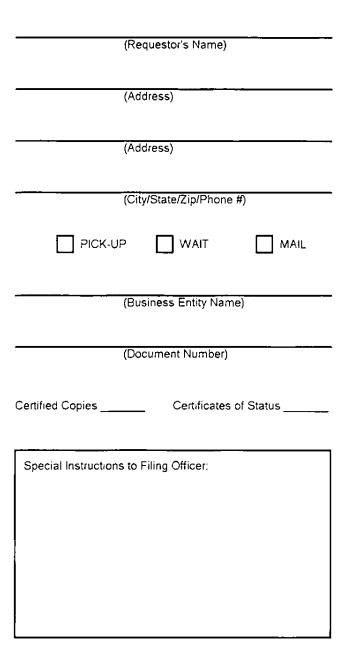
L22 000 223 375



Office Use Only





200429922202

05/15/04 61/17 4011 4:25/01

SECREMAY 16 PM 4:20

COVER LETTER

TO:

Registration Section Division of Corporations

| SUBJECT: THE E | XY DEVS MOD Name of Limite | BAY DIE d Liability Company | At St | <u> 1010</u> Belezo |
|---|-------------------------------|---|--|---|
| The enclosed Articles of Amend | lment and fee(s) are submi | itted for filing. | | |
| Please return all correspondence | concerning this matter to | the following: | | |
| | Brittne | Name of Person | n Lir | na |
| | | Firm/Company | | |
| | 701 Rue | MCX Address | St | |
| | Pen | SACOLA City/State and Zip Coo | F1 36 | 607 |
| P | ritheumn | he used for future annu | angai | 1 COM |
| For further information concern | ing this matter, please call: | : | | |
| BNHMLY M Name of Person | oon Lima | at (<u>X60</u>) Area Code | Daytime Te | Lephone Number |
| Enclosed is a check for the follo | = | S55.00 Filing Fe Certified Copy (additional copy is | | □ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address: Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323 | ntions | Regis Divis The C 2415 | Address: stration Section ion of Corpor Centre of Talla N. Monroe St hassee, FL 32. | ations nhassee reet, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Barbership Barbie at Studio Belezal
(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 Florida document number <u>L220002233</u> 75 | were filed on $05/19/20$ | 22 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name of the limited liability of the new name of the new nam | 10P LLC | r the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 701 Rue ma | X St |
| (Principal office address MUST BE A STREET ADDRESS) | Pensacola, F | 132507 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered office as agent and/or the new registered office address here: Name of New Registered Agent: | ddress on our records, <u>enter th</u> | e name of the new registered |
| | | NS. 0 - DE |
| New Registered Office Address: | Enter Florida street address | PH 4:2 |
| | , Florid | 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 |
|--------------|-------------|--------------|----------------|
| | | | □ ∧dd |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | ☐ Change |
| | | <u></u> | □Add |
| | | | □Remove |
| | | | ☐ Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | _ | □Remove |
| | | | □Change |

Page 2 of 3

| . Ham | rending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|-----------|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| (If an el | tive date, if other than the date of filing: |
| | cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed. |
| Dated | April 29th 2004 |
| | Signature of a member or authorized representative of a member |
| | Signature of a member of audiorized representative of a member |
| | botthey moon lima |

Page 3 of 3