

W22000233642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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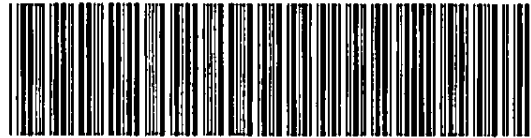
(Business Entity Name)

(Document Number)

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U.S. DEPARTMENT OF STATE
DIVISION OF CONFESSION
22 SEP - 1 PM 4: 35

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIS MUJERES BELLAS 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:

Heana Marrero Rodriguez, Esq.

Name of Person

Lusky & Rodriguez, PA

Firm/Company

770 Ponce De Leon Blvd., Suite 306

Address

Coral Gables, FL 33134

City/State and Zip Code

irodriguez@jirlaw.com

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

For further information concerning this matter, please call:

Heana Marrero Rodriguez

305 442-1245
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

22 SEP - 1 PM 4:35

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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

MIS MUJERES BELLAS 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 5/19/2022 and assigned
Florida document number L22000233642.

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 "LLC."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida** _____
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>
PRES	RAFAEL J TAMAYO	8940 SW 40TH STREET	<input type="checkbox"/> Add
		MIAMI, FL 33165	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RAFAEL J TAMAYO	8940 SW 40TH STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33165	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WILLIAM BRUNO PUENTE	8940 SW 40TH STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33165	<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

22 SEP 2014
PH 4:35
MISSION OF THE
FEDERAL BUREAU OF
INVESTIGATION
U.S. DEPARTMENT OF
JUSTICE

22 SEP - 1 PM 4:35

22 SEP - 1 PM 4:35

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.

Dated SEPTEMBER 5, 2022

Signature of a member or authorized representative of a member

Rafael J Tamayo

Typed or printed name of signee