

122000370414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

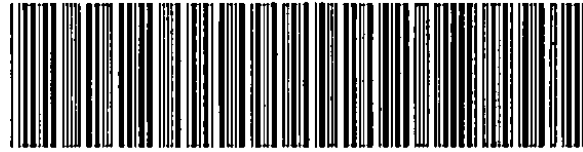
(Business Entity Name)

(Document Number)

ed Copies _____ Certificates of Status _____

cial Instructions to Filing Officer:

Office Use Only



300395929093

LLC N/C Amend

10/17/22--01016--030 **25.00

FILED
2022 OCT 17 PM 12 39

A. RAMSEY

JAN - 9 2023

Registration Section
Division of Corporations

EFFECT: Eve Brow and Lip Effects LLC
Name of Limited Liability Company

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

return all correspondence concerning this matter to the following:

	Cassidy Bishop
	Name of Person
	New Business Filing
	Firm/Company
	8170 Washington Village Drive
	Address
	Dayton, OH 45458
	City/State and Zip Code
	orders@newbusinessfiling.org
	E-mail address: (to be used for future annual report notification)

other information concerning this matter, please call:

Cassidy Bishop	at () 888-701-6450
Name of Person	Area Code Daytime Telephone Number

enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$5.00 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

**TO
ARTICLES OF ORGANIZATION
OF**

FILED

2022 OCT 17 PM 12:39

Eve Brow and Lip Effects LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 08/23/2022 and assigned
a document number L22000370414.

A amendment is submitted to amend the following:

Amending name, enter the new name of the limited liability company here:

Eves Ombre Brow LLC

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

new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

**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

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

= Manager
R = Authorized Member

R = Authorized Member

Type of Action

☐ Change

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

Effective date, if other than the date of filing: _____ (optional)

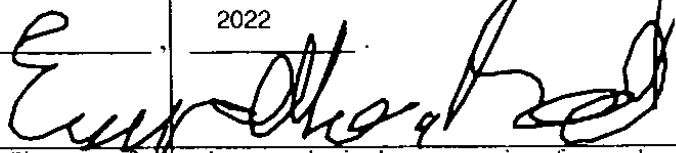
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

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 document is filed.

Effective date: _____
October 11

2022



Signature of a member or authorized representative of a member

Evangellina Persaud

Typed or printed name of signee