

10/26/22, 12:14 PM

Division of Corporations

62000366994

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : I20180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ALLFABULOUSBEAUTY LLC**

Certificate of Status	0
Certified Copy	0
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Electronic Filing Menu

Corporate Filing Menu

Help 2 6 2022

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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ALLFABULOUSBEAUTY 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 09/20/2022 and assigned
Florida document number L22000410968

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)

14311 BISCAYNE BLVD
NORTH MIAMI FL 33181

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 612075
MIAMI FL 33261

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:

FABIOA BOBBIADOTTE

New Registered Office Address:

14311 BISCAYNE BLVD

Enter Florida street address

NORTH MIAMI, Florida 33181
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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	BERNAD, FABIOLA	1230 NE 12TH AVE	<input type="checkbox"/> Add
		MIAMI, FL 33161	<input checked="" type="checkbox"/> Remove ✓
			<input type="checkbox"/> Change
AMBR	FABIOLA BERNADOTTE	1230 NE 12TH AVE	<input checked="" type="checkbox"/> Add X
		MIAMI, FL 33161	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	FABIOLA BERNADOTTE	14311 BISCAYNE BLVD	<input checked="" type="checkbox"/> Add
		NORTH MIAMI FL 33181	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

I WOULD LIKE FOR THE ADDRESS TO BE THE
PO BOX ON RECORD TO THE PUBLIC IF THAT IS
POSSIBLE THANK YOU

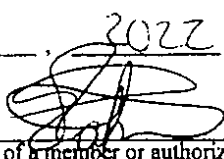
E. Effective date, if other than the date of filing: _____ (optional)

(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.

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 10/12/22, 2022.



Signature of a member or authorized representative of a member

FABIOLA BERNADOTTE

Typed or printed name of signee

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