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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TEN4 GLOBAL SERVICES INC

Account Number : I20220000168 Phone : (561)628-7949 Fax Number : (156)158-4000

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 MAKEOVERBEAUTI STUDIO LLC

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Page Count	06
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AUG 10 2023

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Tallahassee, FL 32303

COVER LETTER

TO:	Registration Se Division of Cor			
A11 185 182	7	MAKEOVERI	BEAUTI STUDIO LLC	٠.
SUBJE	C1:	Name of Lim	ited Liability Company	*
The enc	losed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
			MARIA S LOREFICE	
			Name of Person	
		M.A	AKEOVERBEAUTI STUDIO	O LLC
			Firm/Company	
		1	000 E HILLSBORO BLVD	
			Address	
		DE	EERFIELD BEACH FL 334	41
			City/State and Zip Code	
			LOBOTEN@YAHOO.CON	
		E-mail address: ()	o be used for future annual repo	ort notification)
For furt	her information c	oncerning this matter, please ca	ill:	
	MARI	A S LOREFICE	201 at ()	6478289
	Name of	l'Person		Daytime Telephone Number
Enclose	d is a check for th	ne following amount:		
■ \$ 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	MailingAddress Registration S		<u>StreetAddro</u> Registratio	
	Division of C	orporations	Division o	f Corporations
	P.O. Box 632 Tallahassee. I			c of Tallahassee lonroe Street, Suite 810

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

MAKEOVERBEAUTI STUDIO 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	and assigned
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 al	obreviation "L.L.C."
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 nan	
agent and/or the new registered office address here:	1000 mg
Name of New Registered Agent:	•
New Registered Office Address:	င်
Enter Florida street address	<u> </u>
Florida	
City	Zip Coden
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agree to act in this capacity. I further ag	

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 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
MGR	MARIA S LOREFICE	704 SE 2nd AVE APT 441	■Add
		DEERFIELD BEACH FLORIDA 33441	
			□Change
			□Add
			□Remove
			□Change
			ПRеточе
			□ Change
			□ Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
		 	Remove
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E. Effective date, if other than the tif an effective date is listed, the date mus Note: If the date inserted in this b document's effective date on the E	e date of filing: O5/19/2023 (optional) ist be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 block does not meet the applicable statutory filing requirements, this date will not be I Department of State's records.	605.0207 (3)(h isted as the
f the record specifies a delayed effective ecord is filed	ve date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day at	fter the
Dated06:16		
	Signature of a member or authorized representative of a member	
	Maria Stephania Loretice	
	Typed or printed name of signee	