

7/5/23, 10:41 AM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L22000514124**

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To:

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

From:

Account Name : ICONNECT SOLUTIONS CORP  
Account Number : I20190000122  
Phone : (407)863-0096  
Fax Number : (407)612-2181

**\*\*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  
MICHELLE'S DEMOLITION, LLC**

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2023 JUL -5 PM 1:50

APPROVED  
AND  
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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MICHELLE'S DEMOLITION, 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:

EMERSON CORREA

Name of Person

ICONNECT SOLUTIONS CORP

Firm/Company

6735 CONROY ROAD STE 309

Address

ORLANDO, FL 32835

City/State and Zip Code

CONTACT@ICONNECTSC.COM

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

For further information concerning this matter, please call:

EMERSON CORREA

at ( 407 ) 863-0096

Name of Person

Area Code

Daytime Telephone Number

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

MICHELLE'S DEMOLITION, 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 12/07/2022 and assigned  
Florida document number L22000514124.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

LL27 BARBERSHOP LLC

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:

18 EAST SAMPLE ROAD

(Principal office address MUST BE A STREET ADDRESS)

POMPANO BEACH, FL 33064

Enter new mailing address, if applicable:

18 EAST SAMPLE ROAD

(Mailing address MAY BE A POST OFFICE BOX)

POMPANO BEACH, FL 33064

**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:

ICONNECT SOLUTIONS CORP

New Registered Office Address:

6735 CONROY ROAD STE 309

*Enter Florida street address*

ORLANDO

*City*

Florida

*State*

32835

*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.*

*Emerson Correa*

If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FL  
SECRETARY OF STATE



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

AMENDING THE COMPANY'S NAME TO: LL27 BARBERSHOP LLC

CHANGING THE COMPANY'S MAILING AND PRINCIPAL ADDRESS TO:

18 EAST SAMPLE ROAD

POMPANO BEACH, FL 33064

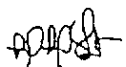
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 JUNE 30 2023



Signature of a member or authorized representative of a member

LEONARDO LIMA DA SILVA

Typed or printed name of signee