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Y 10/24/2012

COVER LETTER

	ion Section of Corporations		
вивјест:	Desircible Tresse	s Llc	
	Name of Lim	ited Liability Company	
The enclosed Artic	eles of Amendment and fee(s) are sub	mitted for filing.	
Please return all co	orrespondence concerning this matter	to the following:	
	Shorwillo	1 Sperman	
		Name of Person	
		Firm/Company	
	_738 Ben	Address	
	Jacksonville	e, Florida 3220 City/State and Zip Code	S
	Schwan E-mail address:	To be used for future annual report notif	ication)
For further inform	nation concerning this matter, please o	all:	
Shaquil	Name of Person	at (<u>CNU</u>) 352 - Area Code Daytime	: Telephone Number
Enclosed is a chec	ck for the following amount:		
☑ \$25.00 Filing	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Address:	Street Address: Registration Sec	ction

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Phone: 904-352-6824
Return Address: 738 Bent Boum Rd
Jacksonville, FL 32205

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Desirable Tres	ises LLC	_	2023 CCT 18	PH 1: 25
Desirable Tree (Name of the Limited L. (A F	iability Company a lorida Limited Liabi	s it now appears on our r lity Company)	-	
The Articles of Organization for this Limited Liabil	ity Company wer	ilaa	12023	_ and assigned
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	limited liability	company here:		
Her Hair Empire LLC The new name must be distinguishable and contain the words				
The new name must be distinguishable and contain the words	"Limited Liability C	ompany," the designation	"LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable	<u> </u>		-	
(Principal office address MUST BE A STREET A	DDRESS) _			
	_			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO)	- V)			
Manual Ma	<u> </u>			
B. If amending the registered agent and/or regis agent and/or the new registered office address he		ress on our records, <u>e</u>	nter the name o	f the new registered
agent and/or the new registered office address no	<u>.1 C</u> .			
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida street a	ddress	
_		Cin:	_ Florida	Zin Coda
		$X_{-}HV$		ZIIZ CORE

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 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□ Add
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			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove

□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 October 14 Signature of a member or authorized representative of a member Shockilla Spectron
Typed or printed name of signee