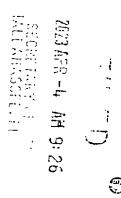
# L230000(8211

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinent tombor)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE  APR - 5 202

Office Use Only



900405618309





# , FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

04/04/23

NAME: ALIDA BEAUTY SALON LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

## **COVER LETTER**

TO: Registrat Division					
OUR IDOX		UTY SALON LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Artis	alec of A	mendment and fee(s) are sub	mitted for filing		
		dence concerning this matter	-		
		Stefanny Estrella Abreu			
			Name of Person		<del>.</del>
			Firm/Company		
		2707 SW 37TH AVE			
		·	Address	-	
		Coconut Grove, FL 33133			
		stefannyestrella@hotmail.co			
For further information	ation cor	E-mail address: () acerning this matter, please or	to be used for future annual r all:	report notification)	
Stefanny Estrella	Abreu		857 251	3967	
1	Name of F	'erson		Daytime Telephone	Number
Enclosed is a chec	k for the	following amount:			
<b>≘</b> \$25.00 Filing	Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	osed) C	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
Mailing A			Street Ad		
Registration Section		Registration Section Division of Corporations			
Division of Corporations P.O. Box 6327		The Centre of Tallahassee			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALIDA BEAUTY SALON LLC			
(Name of the Lin	nited Liability Compa (A Florida Limited	any as it now appears on c Liability Company)	ur records.)
The Articles of Organization for this Limited	Liability Company	were filed on February	v 07, 2023 and assigned
Florida document number 1.23000068277	<del></del>		_
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liab	ollity company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	2707 SW 37TH AVE	
(Principal office address MUST BE A STRE	ET ADDRESS)	Coconut Grove, FL 33133	
Enter new mailing address, if applicable: Mailing address MAX BE A POST OFFICI	<u> E <i>BOX</i>)</u>	2707 SW 37FH AVE Coconut Grove, FL 33133	
B. If amending the registered agent and/or agent and/or the new registered office addronates.  Name of New Registered Agent:			s, enter the name of the new regis
	2707 SW 37TH AVE		
New Registered Office Address:  Enter Florida street address			eet address
	Coconut Grove		, Florida <sup>33133</sup>
		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

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
AMBR	Alida A Abreu Estrella	2707 SW 37TH AVE	
		Coconut Grove, FL 33133	□Remove
			Change
AMBR	Stefanny Estrella Abreu	2707 SW 37TH AVE	□ Add
		Coconut Grove, FL 33133	□Remove
			≅Change
			□ Add
		<del> </del>	□ Remove
			Change
			□Add
			□Remove
		<del></del>	\( \text{\text{\$\exititt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}}}}\$}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}
·			□Add
			□Remove
			□Add
			□Remove
			TChange

II AUN	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
-	
-	
-	
-	
-	
_	
_	
_	
_	
_	
an effe lote:	ve date, if other than the date of filing:
record is file	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
ated _	April 04 , 2023
	Signature of a member or authorized representative of a member
	Stefanny Estella About

### **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJE	ALIDA BE.	AUTY SALON LLC		
		Name of Lin	nited Liability Company	
The end	closed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Stefanny Estrella Abreu		
			Name of Person	
			Firm/Company	
		2707 SW 37TH AVE		
		<del></del>	Address	
		Coconut Grove, FL 33133		
			City/State and Zip Code	<del> </del>
		stefannyestrella@hotmail.c		
		E-mail address: (	to be used for future annual report not	ification)
For furt	her information co	incerning this matter, please o	all:	
Stefann	y Estrella A <del>bre</del> u		857 2513967 at ()	
	Name of	Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for the	e following amount:		
<b>■ \$</b> 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)
	Mailing Address Registration Se		<u>Street Address:</u> Registration Sec	ction

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

.

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