## L23000134247

(Re	equestor's Name)
(Ad	ddress)
(Ád	ddress)
(Cit	ty/State/Zip/Phone #)
☐ PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
i.	

Office Use Only



000435079530

65/12/24 -6. Juli-615 \*\*\*25.dd

FILED
2024 SEP 12 AM 9: 40



## **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

	Registration Se Division of Cor			
SUBJEC		ITA NATURAL HAIR CARE	LLC	
SODIEC	, I +	Name of Lin	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		MARGARITA PAYERO		
			Name of Person	
			Firm/Company	
		13335 NW 7TH AVE		
		· -	Address	
		MIAMEEL 33168		
			City/State and Zip Code	
			HAIRCARE@GMAIL.COM	<del></del>
E 6 4			to be used for future annual report	notification)
ror turtn	er information e	oncerning this matter, please c	att:	
MARGA	ARITA PAYERO	)	786 217-209 at ()	2
	Name o	f Person	Area Code Da	ytime Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>≡</b> \$25,	00 Filing Fee	☐ \$30.00 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 Addres Registration S	Section	Street Address Registration	Section
	Division of C	orporations	Division of (	Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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

FILED

MARGARITA NATURAL HAIR CARE LLC	ZŪ	24 SED 12
MARGARITA NATURAL HAIR CARE LLC  (Name of the Limited Liability Con (A Florida Limit	npany as it now appears on	our records AH 9: 1.0
(A FRANCE	3E	CRETAILCOS
(A Florida Limit The Articles of Organization for this Limited Liability Compa	inv were filed on SEPTE	Stabelia 305 STATE and assigned
Florida document number 1.23000134247		
riorida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designa	ation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our record	ds. enter the name of the new registered
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	Enter Florida st	reet address
		Florida
	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>	<u>Name</u>	Address	Type of Action
MGR	VALENTINA DELEON	13335 NW 7TH AVE	<b>≡</b> Add
		MIAMI FL 33168	□Remove
		<del></del>	Change
		Remove	
		Change	
		□Add	
			□Remove
		Change	
		□Remove	
			□Change
		Remove	
			□Change
			□Add
			Remove
			□Change

N/A	ion, enter change(s) here: (Attach additional sheets, if necessary.)
	<del></del>
<del></del>	
	<del></del>
<del></del>	
<del></del>	<del></del>
	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b ck does not meet the applicable statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective record is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated SEPTEMBER 9	2024
iln.	<u> </u>
4/4	oignature of a member or authorized representative of a member
, MARGARITA PAYERO	

Typed or printed name of signee