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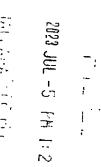
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Division of Cor			
DEALITY O	DAD IIC		ISIS
CT: BEAUTY E	Name of Limite	d Liability Company	
eturn all correspo	ondence concerning this matter to	the following:	
	ISIS BARGALLO		
		Name of Person	
	ISIS BEAUTY BAR LLC		
		Firm/Company	
	106003 Overseas Hwy	#3802	
		Address	
	KEY LARGO, FL 3302	1	
	Isisbargallo@gmail.c	City/State and Zip Code	
	E-mail address: (to	be used for future annual report not	ification)
her information c	oncerning this matter, please call	:	
	ISIS BARGALLO	786	286-2151
Name o	f Person	at () Area Code Daytin	ne Telephone Number
d is a check for th	he following amount:		
.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
	her information contact Name of the second Articles of the second Ar	Name of Limite losed Articles of Amendment and fee(s) are submeturn all correspondence concerning this matter to ISIS BARGALLO ISIS BEAUTY BAR LLC 106003 Overseas Hwy KEY LARGO, FL 3302 Isisbargallo@gmail.c E-mail address: (to her information concerning this matter, please call ISIS BARGALLO Name of Person d is a check for the following amount: .00 Filing Fee \$30.00 Filing Fee &	Name of Limited Liability Company losed Articles of Amendment and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following: ISIS BARGALLO Name of Person ISIS BEAUTY BAR LLC Firm/Company 106003 Overseas Hwy #3802 Address KEY LARGO, FL 33021 City/State and Zip Code Isisbargallo@gmail.com E-mail address: (to be used for future annual report noting the information concerning this matter, please call: ISIS BARGALLO 786 at (

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

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TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ANI		MGANIZATI	ON ,
	O	F 2	123 JUL -5 PK 1:2
			JUL -5 CH
ISIS BEAUTY BAR LLC		<u> </u>	1:2
(Name of the Limit	ed Liability Compa (A Florida Limited)	ny as it now appears (Liability Company)	on our records.)
The Articles of Organization for this Limited Li L23000150122 Florida document number			$\mathcal{F}_{i}(t) = \mathcal{F}_{i}(t) + \mathcal{F}_{i}(t)$
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here	<u>:</u>
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		3595 SHERIDA	N STREET STE 105
		HOLLYWOOD, F	L 33021
(Principal office address MUST BE A STREE	<u>T ADDRESS)</u>		
		106003 Overseas Hwy #3802	
Enter new mailing address, if applicable:		Key largo, FL 33037	
Mailing address MAY BE A POST OFFICE	BOX)		
		 15 - 1	
B. If amending the registered agent and/or r		address on our rec	ords, enter the name of the new regist
agent and/or the new registered office addres	is nere.		
Name of New Registered Agent:	LLO		
Name of New Registered Agent.	106003 OVA	rseas Hwy #380	2
New Registered Office Address:	100003 046		<u> </u>
		Enter Florida	i street address
	KEY LARGO		, 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

DocuSign Envelope ID: 8B2478F9-3C32-4DA2-9D15-5E4081A77FEF it amenting Authorized rerson(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	ISIS BARGALLO	106003 Overseas Hwy#3802 Key largo, FL 33037	XIAdd
			□Remove
			□Change
			□ Ad d
			□Remove
			□Change
			□Add
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ective date, if other than the	date of filing:	(optional) ng or more than 90 days after filing.) Pursuant to 605.020
te: If the date inserted in this bl	ock does not meet the applicable statutor	ry filing requirements, this date will not be listed a
nument's effective date on the D	epartment of State's records.	
cord specifies a delayed effectiv	re date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
s filed.		
6/20/2023	6/20/2023	
ed		
	DocuSigned by:	
	Isis Bargallo Signature of a member of authorized represe	

Filing Fee: \$25.00