

L23000163711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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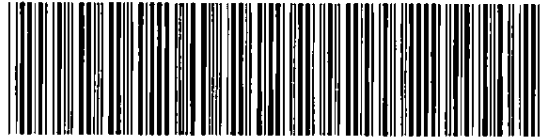
(Business Entity Name)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OH BELLEZA Y MAS 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:

NOHORA MORENO

Name of Person

CONSULTAN MORENO LLC

Firm/Company

2164 SW 83 TERR

Address

DAVIE FL 33324

City/State and Zip Code

consultanmoreno@gmail.com

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

For further information concerning this matter, please call:

NOHORA MORENO

954

9525697

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 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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(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

2024 SEP 20 AM 8:38
COUNTY OF DADE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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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 SEPTEMBER 12 2024

Zayda R. Parker

Signature of a member or authorized representative of a member

Zayda Raquel Juarez Ayerdis

Typed or printed name of signee