## L23000218175

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



300409220463

05/31/23--01043--029 \*\*55.00

2023 MAY 31 PM 3: 34

Y. SCOTT JUL 2 3 2023

## **COVER LETTER**

то:		stration Section of Corp			
2135 (122		ASHES &	BROWNS BY PAOLA CACI	ERES LLC	
SUBJEC	1: <u> </u>	<del></del>			
The encl	osed i	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn a	II correspor	ndence concerning this matter	to the following:	
			PAOLA A CACERES GU		
				Name of Person	
				Firm/Company	_
			14515 SEAFORD CIR AP	1' 202	2023 h
			TAMPA/ FL 33613	Address	M 31
			ypstaxesservices@gmail.cor		2023 KAY 31 PH 3: 34
For furth	er info	ormation co	te-mail address: (t oncerning this matter, please ca	o be used for future annual report notification)	구성 - 기상 - 기상 - 기상 - 기상 - 기상 - 기상 - 기상 - 기상
PAOLA	A CA	CERES GU	JERRERO	463 7104858 at ( )	
		Name of	Person	Area Code Daytime Telephone Num	iber
Enclosed	is a c	heck for the	e following amount:		
□ \$25.	.00 Fit	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, ficate of Status & fied Copy and copy is enclosed)
	Regi Divi:	ng Address stration S sion of Co Box 6327	ection orporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314				2415 N. Monroe Street, Suite	e 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LASHES & BROWNS BY PAOLA CACERES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{05/03/2023}{1}$ and assigned Florida document number  $\frac{L23000218175}{L}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LASHES & BROWS BY PAOLA CACERES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 14515 SEAFORD CIR APT 202, TAMPA, FL 33613 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 14515 SEAFORD CIR APT 202, TAMPA, FL 33613 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

Florida

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
<u></u>			□Add
			□Remove
			□Change
			□ Remove
	<u></u>		Add Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		<del></del>	□Remove
			Change

	·					<u> </u>
						. 29
						2023 16
	<del></del>		<del></del>		<del></del> -	<u> </u>
				- <u> </u>		PA T
						757 2
-						
<del>-</del>				-		
<del>-</del> .						
	<del></del>	<del></del>				

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 MAY 10	2023
	Signature of a member of authorized representative of a member
	PAOLA A CACERES GUERRERO
	Typed or printed name of signee

Filing Fee: \$25.00