## La3000313665

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SEGRETARY OF STATE
SEGRETARY OF STATE

Y. SCOTT AUG 19 2023

## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations				
	TECH LLC				
SUBJECT:	Name of Lir	nited Liability Compan	У		
	Amendment and fee(s) are sub	_			
Please return all correspo	ndence concerning this matter	to the following:			
	Lorena R Obregon Perez				. •
		Name of Perso	n		2023 JUL 27 PH 3: 05 SECRETARY OF STATE
		Firm/Company	,		2
	15816 Northgate LN				PR
		Address			- Mos
	Spring Hill FL 34610				05 17E
		City/State and Zip (	Code		<del></del>
	lorenadunieski@gmail.com				
For further information c	e-mail address: ( oncerning this matter, please c	to be used for future math:	nnual report noti	lication)	
Lorena R Obregon Perez	•	727	645 8336		
Name o	f Person	Area Code	Daytim	e Telephone Numb	<del></del>
Enclosed is a check for th	ne following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Certified Cop (additional copy	Filing Fee, ate of Status & d Copy al copy is enclosed)		
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Reg Div The 241	et Address: gistration Servision of Core c Centre of Tore 5 N. Monro- lahassee, FL	porations allahassee e Street, Suite	810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOLI NAIL TECH LLC	
(Name of the Limited Liability Company a (A Florida Limited Liabi	s it now appears on our records.) ity Company)
The Articles of Organization for this Limited Liability Company wer	te filed on $\frac{06/30/2023}{}$ and assigned
Florida document number L23000313665	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
he new name must be distinguishable and contain the words "Limited Liability C	'ompany," the designation "LLC" or the abbreviation "L,L,C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	2023 SEC
_	
inter new mailing address, if applicable:	27
Mailing address MAY BE A POST OFFICE BOX)	SO D III
	rs Q
<del>-</del>	0 5
3. If amending the registered agent and/or registered office addr	
gent and/or the new registered office address here:	
Name of New Registered Agent:	
No. 1007 All	
New Registered Office Address:	Enter Florida street address
	Florido

## 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.

City

Zip Code

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
MGR	Lorena R Obregon Perez	15816 Northgate L.N Spring Hill FL 34610	□Add
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			\=Change
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effectiv	e date is	listed, the		e specific	and can					(opt 0 days afte	r tilin	ig.) Pu		
			n this bloo n the Dep					utory filir	g require	ments, th	is dat	te wil	l not be li	sted .
ord sp filed.	ecifies a	delayed	effective	date, but	not an e	ffective	time, at 1	2:01 a.m.	on the ea	rlier of: (	b) 7	The 90	)th day af	ter th
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