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COVER LETTER

	ision of Cor					
SHD IECT.	GLAM BY MARI LLC					
SUBJECT:	•	Name of Lim	ited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		MARIUXI CARRERA				
		 	Name of Person			
			Firm/Company			
		15531 ORCHARD DR				
		MIRCTLARIS CL. 22 (76)	Address			
		WESTLAKE FL 33470	City/State and Zip Co	nde		
		FLORIDA33463@YAHOC				
For further i	nformation c	E-mail address: (oncerning this matter, please c	to be used for future ann all:	ual report notif	ication)	
MARIUXI	CARRERA		561	358-8910		
	Name o	f Person	Area Code	Daytime	Telephone Number	
Enclosed is	check for th	ne following amount:				
■ \$25.00 I	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing F Certified Copy (additional copy is	•	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclose	
	iling Addres			t Address:	dian.	
Registration Section Division of Corporations			Registration Section Division of Corporations			
	D. Box 632	•		Centre of T		
	Hahassee, I				Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLAM BY MAKIELC		<u> </u>
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.23000382997	were filed on 08/15/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
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 of the new registere
agent and/or the new registered office address here:		2 44
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
	. Florid	a
	Cuy	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

CO. . 1.4 D.17 1.4 4.19 1.1.1.1.1

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 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	Mariuxi Cartera	15531 Orchard Dr	■Add
		Westlake, FL 33470	□Remove
			□Change
MGR	Marcelo Carrera	15531 Orchard Dr	≅ Add
		Westlake, FL 33470	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			Remove
			Change
			Remove
			□Change

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fective date, if other than the date in effective date is listed, the date must be some: If the date inserted in this block of cument's effective date on the Depart	pecific and cannot be pr locs not meet the app	for to date of filing of i licable statutory fili	(option of the control of the contro	filing.) Pursuant to 605.	0207 cd as
ecord specifies a delayed effective dat is filed.	e, but not an effective	s time, at 12:01 a.m.	on the earlier of: (b)) The 90th day after	the
September 27	2023				
// n/ ,	7,				
Sign S	ature of a member or at	nthorized representativ	e of a member		
0,5		,			