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VISION OF CORPORATIONS

Y. SCOTT NOV 15 2023

COVER LETTER

TO: Registration Se Division of Cor		í	ŧ	
	E PERMANENT MAKE-UP, I	.LC		
SUBJECT:	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing		
	ondence concerning this matter	_		
	WANDA L. REEVES			
		Name of Person	_	207
	ACCOUNTING & CLER	ICAL BY REEVES & ASSOCIA	TES	2023 HOV -3
		Firm/Company		1
	501 GOODLETTE ROAD	, SUITE B204		
		Address		ာ ယှ
	NAPLES, FLORIDA 3410)2		PH 3: 02
	wandaacra@earthlink.net	City/State and Zip Code		
	E-mail address: ()	o be used for future annual report not	ification)	
For further information e	oncerning this matter, please ca	dl:		
JENNIFER HANKS		918 850-7646		
Name o	f Person	at () Area Code Daytin	ne Telephone Number	_
Enclosed is a check for the	ne 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 by Certificate of Sectified Copy radditional copy in the control of the copy in the c	Status &
Mailing Addres		Street Address:		
Registration S		Registration Se Division of Co		
Division of C P.O. Box 632		The Centre of	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNSHINE PERMANENT MAKE-UP, 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 Com	npany were filed on 08/21/2023	and assigned
Florida document number L23000393552		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
SUNSHINE PERMANENT MAKEUP AND AESTHETICS, I	LLC	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	SS)	
		SE IVIS 2023
		HOV
Enter new mailing address, if applicable:		OF OR
(Mailing address MAY BE A POST OFFICE BOX)		3 00 E
wants with the first of the bony	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered of	ffice address on our records, <u>ente</u>	r the name of the new registere
agent and/or the new registered office address here:		
New CNL D. L. LA		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	ASS
		lorida
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	gent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of my duties, a at as provided for in Chapter 605,	and I am familiar with and , F.S. Or, if this document is
ī	f Changing Registered Agent, Signature	of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or remove	d trom our records:	
MGR =	Manager	
AMBR =	Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			23 NSECRET
			FILED SECRETARY OF STATE APPROXIMENT COMPORATIONS APPROXIMENT COMPORATIONS APPROXIMENT COMPORATIONS APPROXIMENT COMPORTIONS AP
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			ПРатоги

. If amending any other informatio	A Company of the Comp		** * ***
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			<u> </u>
			2023
-			SECRETAR DIVISION OF C
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			PH 3: 02
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Effective date, if other than the da (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	specific and cannot be prior to date does not meet the applicable st		fler filing.) Pursuant to 605.0207 (3
he record specifies a delayed effective da ord is filed.	ite, but not an effective time, at	12:01 a.m. on the earlier of	(b) The 90th day after the
Dated OCTOBER 30	2023		
an Aki			
Sig	nature of a member or authorized r	representative of a member	

Filing Fee: \$25.00