

L23000423051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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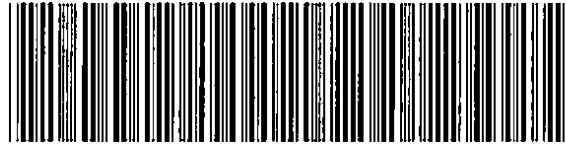
(Business Entity Name)

(Document Number)

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COVER LETTER

O: Registration Section
Division of Corporations

SUBJECT: MLC BEAUTY WITHIN 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:

MARIE LOURDES CHERRY
Name of Person

MLC BEAUTY WITHIN LLC
Firm/Company

2866 N. PINE HILLS RD #235
Address

Orlando FL 32808
City/State and Zip Code

MarieLourdescherry5@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIE LOURDES CHERRY at (4089) 214 2093
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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TALLAHASSEE, FL

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MILC Beauty WITHIN 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 09/11/2023 and assigned
Florida document number L23000423051

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

Same

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

Same

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MARIE LOURDES CHERRY

New Registered Office Address:

2866 N. PINE HILLS Rd #235

Enter Florida street address

Orlando

City

Florida

FL 32808

Zip Code

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.

Marie Lourdes Cherry

If Changing Registered Agent, Signature of New Registered Agent

of 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>	<u>Address</u>	<u>Type of Action</u>
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MGR	MARIE LOURDES CHERRY	2866 N. PINE HILLS RD. APT 235 Orlando FL 32808	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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_____ ☐ Change

AMBR	MARIE LOURDES CHERRY	2866 N. PINE HILLS RD. APT 235 Orlando FL 32808	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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Typed or printed name of signee