123000433183

(Re	questor's Name)	<u>.</u>		
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
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COVER LETTER

Registration Section Division of Corporations

0:

P 173 P 23 C 3723	OUROUS MAKEUP ARTISTRY	. LLC	
	Name of Lin	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing,	
lease return all corre	spondence concerning this matter	to the following:	
	Bruce F. Kleinberg		
		Name of Person	
	Palmetto, Zeigler, Chamba	erlain &Perrella, PL	
		Firm/Company	
	2901 W. Cypress Creek R	oad. Suite 120	
	-	Address	
	Fort Lauderdale, FL 33309	9-1732	
		City/State and Zip Code	
	bkleinberg@pmmpllp.com		
	E-mail address: (to be used for future annual report not	(fleation)
or further informatic	in concerning this matter, please c	all:	
3ruce F. Kleinberg		954 432-3100	
Nan	ne of Person	Area Code Daytin	ne Telephone Number
inclosed is a check fo	or 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)
P.O. Box 6	n Section f Corporations	Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLAMOÙROUS MAKEUP ARTISTRY, 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 September 18th, 2023 and assigned Florida document number L23000433183 his amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: GLAMOROUS MAKEUP ARTISTRY, LLC he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida Zip Code Cuv

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

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 except 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 Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove

If amending any other informat	ion, enter change(s) here: 726	tiacn aaationat sneets, ij n	ecessary.)
			
			
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ffective date, if other than the can effective date is listed, the date must stote: If the date inserted in this blo ocument's effective date on the De	be specific and cannot be prior to date ck does not meet the applicable s	of filing or more than 90 days a	otional) fter filing.) Pursuant to 605.0207 this date will not be listed as
record specifies a delayed effective Lis filed.	date, but not an effective time, al	. 12:01 a.m. on the earlier of	(b) The 90th day after the
ated October 17th,	2023		
13 L			
	Signature of a member or authorized	representative of a niember	
Bruce F. Kleinberg, Regi	stered Agent		
	Typed or printed nan	na at ciuman	