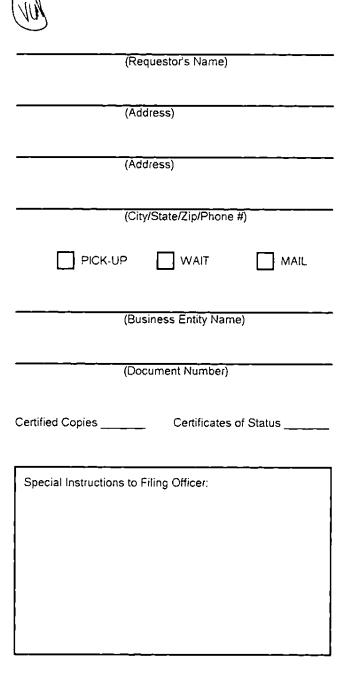
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v	vere filed on 10/24/2023 and assigned
Florida document number <u>L23000485500</u> .	(-) (-) (-)
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
Pajae Michelle Hair and L. The new name must be distinguishable and contain the words "Limited Liability"	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1017 N SR-7 Suite 112
(Principal office address MUST BE A STREET ADDRESS)	Royal Paim Beach F.L. 33411
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1392 Lake Breeze Drive Wellington F.L. 33414
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	7
Name of New Registered Agent:	
New Registered Office Address: 1017	N SR-7 Suite 12 Enter Florida street address
<u> Royan</u>	Paim Beach, Florida 33411 City 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.

COVER LETTER

	gistration Sectivision of Corp			
SUBJECT:	Carac	EFUL E CO F Name of Limi	Sourioue LLC ited Liability Company	
The enclose	d Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspon	dence concerning this matter	to the following:	
			HOUC 14 Name of Person	
		Paige Mi	Chelle Hair and Firm/Company	Lashes LLC
		1392 Lake	Breeze Drive Address 19 + Cn Benda F.L. City/State and Zip Code	
		Bayer Ace	City/State and Zip Code	33414
		Parcye ho E-mail address: (1	o be used for future annual report noti	COP7 fication)
For further i	nformation cor	cerning this matter, please ca	ill:	
Paig	Name of F	OUCIA Person	at (<u>Bb)</u>) <u>60)</u> Area Code Daytim	- 9832 c 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

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
AR	Emily Houck	1392 Lake Breeze Dr	□Add
		Wellington F.L. 33414	Fremove
			□ Change
			🗆 Add
			□Remove
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Effective data if	athar than the date of f	iling		(ontional)	
If an offective date is I	fisted, the date must be specific	e and cannot be prior to	date of filing or more than	(optional) 90 days after filing) Pursuant	to 605 020
Note: If the date in	nserted in this block does n ve date on the Department	not meet the applicab	le statutory filing requir	ements, this date will not b	e listed a
e record specifies a	delayed effective date but	t not an effective time	e, at 12:01 a.m. on the e	arlier of: (b) The 90th day	y after the
rd is filed	actus of control and control a			•	
Dated <u>Ne Ce</u>	mber 7	2023	• ·		
	\circ	c	. /		
	1 / /	1 11 11 12 1			
	Para Signarare	of a member or author	red representative of a me	mber	

Filing Fee: \$25.00