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COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor			
SUBJEC"		& NAILS LOUNGE LLC		
NODJEC	1	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please reti	um all correspo	ondence concerning this matter	to the following:	
		YENISLEIDY HERNANI	DEZ	
			Name of Person	
			Firm/Company	
		8979 SW 28 TH ST		
			Address	
		MIAMI, FL 33145		
		yenitaeuba@gmail.com	City/State and Zip Code	
		·	to be used for future annual report no	otification)
For furthe	er information o	oncerning this matter, please ca	all:	
YENISL	EIDY HERNA	NDEZ	786 827 8550	
	Name o	f Person	Area Code Dayti	ime Telephone Number
Enclosed	is a check for t	he following amount:		
□ \$2 5.0	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 Addres		Street Address:	· antion
Registration Section Division of Corporations			Registration S Division of C	
	P.O. Box 632	-	The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

AK	Tiches or	O	
ART	CICLES OF C	ORGANIZATION F	records.)
BEAUTY & NAILS LOUNGE LL	.C		Mr. PH.
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited L	iability Company	were filed on 10/14/2024	and assigned
Florida document number	<u> </u>		
This amendment is submitted to amend the fol-	owing.		
	2		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
YENISLEIDY HERNANDEZ LLC			
The new name must be distinguishable and contain the	words "Limited Liabii	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	8979 SW 28 TH ST	
(Principal office address MUST BE A STRE	ET ADDRESS)	MIAMI, FL 33145	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records,	enter the name of the new register
Name of New Registered Agent	YENISLEIDY	HERNANDEZ	
New Registered Office Address:	8979 SW 28 TI	ł ST	
		Enter Florida street	address
	MIAMI, FL		, Florida <u>33145</u>
		Cin	7in 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.

If 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
	<u>.</u>		□Add
			□Remove
			Change
			□Add
			□Remove
			Change
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riote.	tive date, if other than the date of filing: [10/14/2024] Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
е гесоі	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
e recor	10/14/2024
e recoi	10/14/2024
e recor	10/14/2024

TOUR EL MARIA