## L24 000 024 026

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer	
Opecial instructions to	riming Officer.	

Office Use Only



900431762309

08/21/24--01025--018 \*\*25.00

24 JUN 21 AM 4: 21

Cover Letter daytime phone number: 813 323 6012

Retern address: 107 El Greco Prive Brandon, FL 33511

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: EVOALLUCE HOLDINAME OF Limited Li	ability Company
The enclosed Articles of Amendment and fee(s) are submitted	l for filing.
Please return all correspondence concerning this matter to the	following:
Brianna	Name of Person
EvoAllure	Firm/Company, J LLC
255 South Oca	nge Ave Sufe 104 #1645 Unddress
	38801  /State and Zip Code  Sed for future annual report notification)
For further information concerning this matter, please call:	
Brianna Linse Name of Person	at (800) 818 7704  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee &  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EvoAllure Ho	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited L Florida document number 1 94000	
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name o	of the limited liability company here:
The new name must be distinguishable and contain the w	words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:
(Principal office address MUST BE A STREE	ET ADDRESS)
Enter new mailing address, if applicable:	UH 21
(Mailing address MAY BE A POST OFFICE	BOX)
	<u> </u>
B. If amending the registered agent and/or ragent and/or the new registered office address	registered office address on our records, <u>enter the name of the new registere</u> ess here:
Name of New Registered Agent:	Brianna Linse
New Registered Office Address:	255 South Orange Ave Suite 104 #1695 Enter Florida street address
	Orlando Florida 3980   Zip Code
New Registered Agent's Signature, if changing l	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>	<u>Name</u>	Address	Type of Action
mbl	Brianna Blake	225 South Orange Ave	□Add
		Suite 104 # 1695	TRemove
		Orlando, FL 32801	□Change
MGR	Brianna Linse	255 South Orange Ave	C.Kdd
		Site 104 # 1695	□Remove
		Orlando, FL 32801	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		<del></del>	□Change
			□Add
			□Remove
		<del></del>	□Change
			□Remove
			□Change

				. <u> </u>	
					<del>.</del>
					<del></del>
		_			
	<del></del>				
-					
			•	•	
ective date, if other to effective date is listed, the	e date must be specific an	d cannot be prior to da			
te: If the date inserted cument's effective date			statutory illing requ	irements, this date v	viii noi be listed as
	d effective date, but no	t an effective time,	at 12:01 a.m. on the	earlier of: (b) The	90th day after the
	a cricerre date, but no				
is filed.	a checking and, par no				
is filed.	1/-	<u></u>			
is filed.	J.	11/m	52		
ecord specifies a delayer is filed.	Signature of a	member or authorize	d representative of a m	ember	