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PICK-UP WAIT MAIL
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SEGNERARY OF STATE

FILED

COVER LETTER

TO: Registration Section of Corp.	erations		
	ISTTER LIFE	SALON LLC	
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	NATALY	LOPEZ,	
	GLITTER	LIFE SALON	LLC
		Firm/Company	
	1078 P	LAZA DRIVE.	
	,	Address	
	Kissimme	ce, FL 34743.	
		City/State and Zip Code	
	nataly lo	OPEZ 1568 (9) SMA	?, l. cod
For further information co	neerning this matter, please ca	•	
NSTALN	LO'PEZ	at (610 674 -	-2011
Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	e 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

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

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>	<u>Address</u>	Type of Action
MGR	LOGANY UTREDA	1636 MARINA LAKE DR	□ Add
		Kissimmer, FL 34744	· Corremove
			Change
AHBR	NATALY LOPEZ,	2205 PINEHURST RD.	` X∕Add
		BETHLEHEM, PA 18018	□Remove
	·		□Add
			□Remove
			□Change
			Remove
			□Change
	_		□Add
			□Remove
			□Change
			□Add
			Remove
			□Change