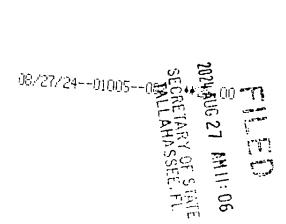
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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor				
SUBJECT:	Di Acosta B Name of Limi	Acosta Beart Brows L.C. Name of Limited Liability Company ment and fec(s) are submitted for filing. concerning this matter to the following: Mercedes Bocrios. Name of Person Lindt Acosta & Sista B beart Brows L.C. Firm/Company Address Address Address Address Address Acct Marcios 16 6 Concil Coon F-mail address: (to be used for future annual report notification) ng this matter, please call: Area Code Area Code Street Address Certificate of Status Certificate of Status Certificate of Status Street Address: Street Address: Street Address: Street Address:		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter t	to the following:		
				LC.
	1446 Lexing	Address	<u> </u>	2024 AUS 27 SECRETA
	Davenport	FL 33837.	·	· · · · · · · · · · · · · · · · · · ·
	Mercy barrios E-mail address: (1)	o be used for future annual report notif	fication)	Shire
	oncerning this matter, please ca			
Mercedes Name o	Darrios of Person	at (<u>776.)</u> 862 Area Code Daytim	e Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Certified Cop	Status & oy
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations	

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cinor Acosta bea	uti brows Uc.
(Name of the Limited Liability Compa (A Florida Limited)	nny <u>as it now appears on our records.</u>) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 24006328056</u>	-1 $\cdot 1$ \cdot
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
Clady Acosta and Sista F The new name must be distinguishable and contain the words "Limited Liabi	3 beauty brows LLC. Hity Company," the designation "LLC."
Enter new principal offices address, if applicable:	1446 Lexington ARES
(Principal office address MUST BE A STREET ADDRESS)	DAVENPORT FL FA 5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1446 Lexinston AVES = 17
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	Cin: Zin 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 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
			□Add
			□Remove
			Change
			□ Add
			□Remove
			SEC 21
			SECRETALIANAS PROPROVE
			21 ALE 27 PROBLEM CHARGE TALL ANASSEE. FL
			Remove
			□Change
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			□Change

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Filing Fee: \$25.00