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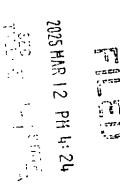
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COVER LETTER

Tallahassee, FL 32314

	tegistration Se Division of Cor				
SUBJECT		HAIR CO LLC			
NODJEC	· · <u></u>	Name of Lim	ited Liability Company		
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	ırn all correspo	ndence concerning this matter	to the following:		
		Jada Walker			
			Name of Person		
		N/A			
Firm/Company					
700 NORTHWEST 10TH AVE					
Address					
	POMPANO BEACH, FL, 33060				
	2025 HAR 12				
		E-mail address: (to be used for future annual report notification	on)	
For further	r information c	oncerning this matter, please ca	dl:	12	
Jada Walk	ker		772 475-0038	PH	
	Name o	f Person		ephone Number 52	
Enclosed i	s a check for th	ne following amount:			
□ \$25.0d	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
	lailing Addres		Street Address:		
Registration Section Division of Corporations			Registration Section Division of Corpora		
P.O. Box 6327			The Centre of Tallal		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJD LUXE HAIR CO LLC		
(<u>Name of the Limited Liability Company as it no</u> (A Florida Limited Liability C	ow appears on our records.) ompany)	_
The Articles of Organization for this Limited Liability Company were file	ed on 02/27/2025 and	assigned
Florida document number L25000084901		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability com	pany here:	
JJD LUXURY COMPANY LLC		
The new name must be distinguishable and contain the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:		·_
(Principal office address MUST BE A STREET ADDRESS)		
	20	7 17
Enter new mailing address, if applicable:	1	2025 M/R
(Mailing address MAY BE A POST OFFICE BOX)	. •	20 Fakta
the state of the s		<u>√ 8</u>
		(10 € CP 2200-220
B. If amending the registered agent and/or registered office address of	on our records, enter the name of the	ட்ட ஆட்டி new registere
agent and/or the new registered office address here:	₹ <u>.</u> 4	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street.address	
	, Florida	
City	Zin Co	de

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>	<u>Name</u>	Address	Type of Action
CEO	Jada Walker	700 NORTHWEST 10TH AVE POMPANO BEACH	_ ≣ Add
			_ □Remove
			_
			□Add
		 	_ □Remove
			_ Change
			_ 🗆 Add
		25.00 Sec. 1	Remove 2025 Hange 12 L
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