## 109000119102

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	<del>f)</del>
PICK-UP	WAIT	MAIL
		^
(Bu	siness Entity Name	) ' ' '
•	•	
(Do	ocument Number)	···
(	,	
Certified Copies	Certificates o	f Status
	_ Ochanicates o	- Olatos
Special Instructions to	Filing Officer:	
		•
	<u>.</u> .	

Office Use Only



500244511195

02/14/13--01030--002 \*\*55.00

2018 FEB IN PH 1:54 SECRETARY OF STATE FALLAHASSEE FLORIDA

FEB 1 5 2012 D. BRUCE

## COVER LETTER "

TO: Registration Division of C	Section Corporations	·	
SUBJECT:		Salon and Spa led Liability Company	Cong Tran LLC
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Picase return all corre	spondence concerning this matter	to the following:	
	C	ONG TRAN Name of Person	
		Regal No.11s	
		• -	1000
	7900 W.M.	:NabRoad Nor	th Laudentale
		Address	COLUMN TO BE
	FL	- ,33068	
	fran	33068 City/State and Zip Code ng tran 0713 Gya	ahov.com
	E-mail address: (t	o be used for future annual report no	rtification)
For further information	n concerning this matter, please ca	al);	
	ONGUYEN	at (954), 673, 7	462
Nam	c of Person	Area Code & Dayt	ime Telephone Number
Enclosed is a check for	the following amount:		
S25.00 Filling Fee	2\$30,00 Filing Fee & Certificate of Status	Certified Copy	□\$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301

(additional copy is enclosed)

(additional copy is enclosed)

Certified Copy

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Regal Nail Salon ar	nd Spa Cong Tran	LLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record liability Company)	<b>L</b> )
The Articles of Organization for this Limited Liability Company Florida document number <u>LOTUDO 11910</u> .	were filed on/2/15/0	2 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited linb	ility company here:	•
Salon and Spa Cong Tr	ran LLC	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	7900 W McH	ab Road
(Principal office address MUST BE A STREET ADDRESS)	North Lauderdo	le FL 33068
Enter new mailing address, if applicable:	CATENIA 10+ C	T Mass-to-
(Mailing address MAY BE A POST OFFICE BOX)	6875 NW 1st C FL 33063	Managare S
		1771 CO 12 manuar
B. If amending the registered agent and/or registered off	fice address on our records, e	nter the name of the new
registered agent and/or the new registered office address here	;	Trick The State
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida strei	et address
	, Floric	
	City	Zip 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	CONG TRAIL	GK75 NWIST CT Margate	_ (Add
		FL 33063	
M <b>G</b> RM	KIM ONGUYEH	6875 M NW 1st CT Marga	te (Add)
		FL 33063	Remove
			Add
			Remove
			Add
			Remove
			Con Add T
		の: の: か: n <sub>e</sub> ,	
		200 200 200 200 200	i: 5
		<i>1</i> 5***	_ Add
			Remove

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	02/08/2013
	( and a second s
	Signature of a member or authorized representative of a member
	CONG TRAN
	Typed or printed game of signee
	Page 3 of 3

Filing Fee: \$25.00

2019 FEB 14 FW 1:55