

2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000042319

Entity Name: SIGNATURE NAIL SYSTEMS LLC

Current Principal Place of Business:

1918 W PRINCETON ST
ORLANDO, FL 32804

Current Mailing Address:

C/O HIEU LE & ASSOCIATES
5085 BUFORD HWY NE
DORAVILLE, GA 30340 11

FEI Number: 27-0168496

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NGUYEN, JOE
1618 SW MORELIA LN
PORT SAINT LUCIE, FL 34953 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOENGUYEN

01/19/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name NGUYEN, JOE
Address 1618 SW MORELIA LN
City-State-Zip: PORT SAINT LUCIE FL 34953

Title MGRM
Name VO, LYNN
Address 1618 SW MORELIA LN
City-State-Zip: PORT SAINT LUCIE FL 34953

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOENGUYEN

OWNER

01/19/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date