737512

(Requestor's Name)	_
(Address)	
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(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦

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10/09/09--01018--021 **43.75

Anuma Mundana Anuma Chason

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORE	PORATION:	Tonya's Nail Fantasy, I	nc.
DOCUMENT NU	MBER:	J3751	
The enclosed Artic	eles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning the	nis matter to the following:	
		Tonya A. Hoover	
		Name of Contact Person	
	Ton	ya's Nail Fantasy, Inc.	and the state of t
		Firm/ Company	
	14902	2 N. Florida Ave. ; Ste F	
		Address	
		Tampa, FL 33613	<u>.</u>
•	(City/ State and Zip Code	
	Tonyasna E-mail address: (to be us	ailfantasy@gmail.com ed for future annual report notification)	
For further informa	ation concerning this matter	, please call:	
Т	onya A Hoover	at (<u>813</u>) 2	63-2924
Name	of Contact Person	Area Code & Daytime Te	lephone Number
Enclosed is a checl	k for the following amount	made payable to the Florida Depar	tment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad		Street Address Amendment Section	
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2009

TONYA A. HOOVER TONYA'S NAIL FANTASY, INC. 14902 N. FLORIDA AVE., STE. F TAMPA, FL 33613

SUBJECT: TONYA'S NAIL FANTASY, INC.

Ref. Number: J37512

We have received your document for TONYA'S NAIL FANTASY, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P08000042645 - TNF, INC...

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 009A00032740

Articles of Amendment to **Articles of Incorporation** of

	د_ َ
Tonya's Nail Fantasy, Inc.	رت\ رمر
(Name of Corporation as currently filed with the Florida Dept. of State)	*
J37512	
(Decument Number of Corneration (if known)	

	J3/31Z	
(Document Nut	mber of Corporation (if known)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Florida Pi	rofit Corporation adopts the follow
A. If amending name, enter the new name of	of the corporation:	
	T.N.S., Inc.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pre	e designation "Corp," "Inc," or "C	Co". A professional corporation
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
D. If amending the registered agent and/or new registered agent and/or the new reg		a, enter the name of the
Name of New Registered Agent:	Tonya A. Hoover	
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if change		
I hereby accept the appointment as registered a	agent. I am familiar with and accep	ot the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PSD	Tonya A Bright	120 E. 144th Ave. Tampa. FL 33613	☐ Add ☐ ☑ Remove
PSD	Tonya A Hoover	120 E. 144th Ave. Tampa, FL 33613	☑ Add ☐ Remove
VP	Shane Devan	120 E. 144th Ave. Tampa, FL 33613	
	ding or adding additional Article dditional sheets, if necessary).		
provisi	mendment provides for an excha ions for implementing the amend not applicable, indicate N/A)	inge, reclassification, or cancellation ment if not contained in the amendr	of issued shares, nent itself:
	NA		

The date of each amendmen	t(s) adoption: October 4, 2009		
Effective date if applicable	October 15, 2009 October 15, 2009		
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.		
	ere approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):		
"The number of votes	cast for the amendment(s) was/were sufficient for approval		
by	(voting group)		
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder		
Signature (By sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)		
	Tonya A. Hoover		
	(Typed or printed name of person signing)		
	PSD		
	(Title of person signing)		