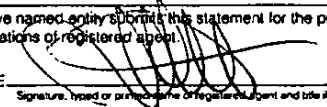
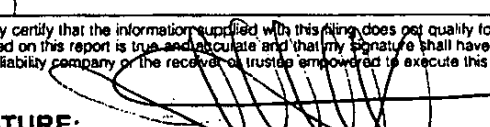


FILED
Mar 31, 2008 8:00 am
Secretary of State

01-25-2008 90085 050 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000047032		
1. Entity Name RUBY NAILS, LLC		
Principal Place of Business 247 3RD STREET NEPTUNE BEACH, FL 32266	Mailing Address 247 3RD STREET NEPTUNE BEACH, FL 32266	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent NGUYEN, HIEN 247 3RD STREET NEPTUNE BEACH, FL 32266		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  (NOTE: Registered Agent signature required when reestablishing) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR NGUYEN, HIEN 8372 HEDGEWOOD DR. JACKSONVILLE, FL 32216	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes. SIGNATURE:  3/26/08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #		



01242008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2823314	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

30002960