

LO60000014474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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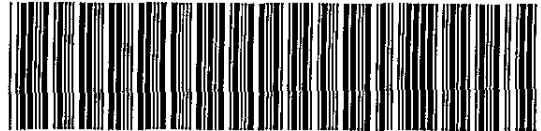
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NY NAILS PHI, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PHI PHI VUONG

(Name of Person)

NY NAILS PHI, LLC

(Firm/Company)

4315 NW 7th Street, Suite 16

(Address)

Miami, FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

PHI PHI VUONG

(Name of Person)

at (954) 907-1388

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|---|---|

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
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION
OF
NY NAILS PHI, LLC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name

The name of the Limited Liability Company is NY NAILS PHI, LLC

ARTICLE II - Principal Office and Address

The mailing address and the street address of the principal office of the Limited Liability Company are

4315 NW 7th Street, Suite 16
Miami, Florida 33126-3560

The Managing Member (s) may, from time to time, move the principal office to any other address in the State of Florida, and establish branch offices in any places within the state of Florida, as the said Limited Liability Company desire.

ARTICLE III -Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida Address of the Registered Agent are

Phi Phi Vuong
2380 Riverdale Drive N
Miramar, Florida 33025

Having been named as Registered Agent and to accept service of process for the above stated limited liability Company at the place designated in this certificate, 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 relating 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 68, F.S.

Phi Phi Vuong

Phi Phi Vuong

DATE *2/23/06*


ARTICLE IV - Manager(s) or Managing member(s):

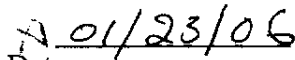
The name and address of the Member and Managing member is as follows

1) Phi Phi Vuong , MGR 2380 Riverdale Drive N, Miramar, FL 33025

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(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

 _____ Phi Phi Vuong
Signature

 _____
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA