

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000081243

FILED
Feb 05, 2008
Secretary of State

Entity Name: SUPER NAILS OF PALM COAST, L.L.C.

Current Principal Place of Business:

1475 PALM COAST PKWY, NW, UNIT #108
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

1475 PALM COAST PKWY, NW, UNIT #108
PALM COAST, FL 32137

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CHIUMENTO & ASSOCIATES, P.A.
4 OLD KINGS ROAD NORTH, SUITE B
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

CHIUMENTO & GUNTARP, P.A.
4 OLD KINGS ROAD NORTH, SUITE B
PALM COAST, FL 32137 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: MICHAEL D. CHIUMENTO

02/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NGUYEN, HUNG
Address: 54 WOOD HAVEN DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: MGRM () Delete
Name: NGUYEN, LAM
Address: 54 WOOD HAVEN DRIVE
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: HUNG NGUYEN

MGRM

02/05/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date