

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000069972

**Entity Name:** LE NAILS & SPA ELITE LLC

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3280 TAMIAMI TRAIL STE 37  
PORT CHARLOTTE, FL 33952 US

**New Principal Place of Business:**

**Current Mailing Address:**

3280 TAMIAMI TRAIL STE 37  
PORT CHARLOTTE, FL 33952 US

**New Mailing Address:**

**FEI Number:** 26-0563407      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

NGUYEN, BOA NGOC T  
3280 TAMIAMI TRAIL STE 37  
PORT CHARLOTTE, FL 33952 US

**Name and Address of New Registered Agent:**

DAN J MAHONEY CPA PA  
2726- TAMIAMI TRAIL  
SUITE D  
PORT CHARLOTTE, FL 33952 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: RENEE DURAN

03/02/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** NGUYEN, BOA NGOC T  
**Address:** 23112 CENTER AVE  
**City-St-Zip:** PORT CHARLOTTE, FL 33952 US

I hereby 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: NGUYEN BOA NGOC

MGR

03/02/2010

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