

209000/22422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

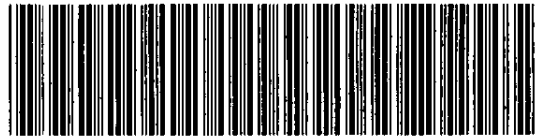
Special Instructions to Filing Officer:

A. LUNT

JAN - 5 2010

EXAMINER

Office Use Only



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2010 JAN - 4 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SIGNED AND
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Icon Nails, LLC
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Quoc Nguyen

Name of Person

Icon Nails

Firm/Company

10674 NW 19th St

Address

Doral, FL 33172

City/State and Zip Code

alypnguyen@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacky Truong

Name of Person

at (954)

9077212

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

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