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Florida Department of State  
Division of Corporations  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ANGEL NAILS AND SPA EXPERT LLC**

Certificate of Status	0
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Page Count	03
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JAN 28 2016  
BRUCE

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

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ANGEL NAILS AND SPA EXPERT LLC

~~(Name of the Limited Liability Company as it now appears on our records.)~~  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/05/2010 and assigned  
Florida document number L10000049945

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

KHANH HUYNH

New Registered Office Address:

11201 SW 55TH ST UNIT 75

*Enter Florida street address*

MIRAMAR

*City*

Florida

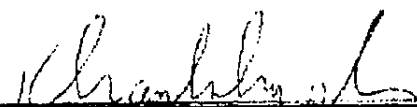
33025

*Zip Code*

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**New Registered Agent's Signature, if changing Registered Agent:**

*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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*



**If Changing Registered Agent, Signature of New Registered Agent**

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHELE VAN	1164 WESTON RD	<input type="checkbox"/> Add
		WESTON FLORIDA 33326	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	ROGIO TRUONG	1164 WESTON RD	<input type="checkbox"/> Add
		WESTON FLORIDA 33326	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	KHANH HUYNH	11201 SW 55TH ST UNIT 75	<input checked="" type="checkbox"/> Add
		MIRAMAR FLORIDA 33025	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	VAN HUYNH	11201 SW 55TH ST UNIT 75	<input checked="" type="checkbox"/> Add
		MIRAMAR FLORIDA 33025	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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