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L10000049945

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

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S. YOUNG

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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:

4661 SW 128TH AVE

(Principal office address MUST BE A STREET ADDRESS)

SOUTHWEST RANCHES, FL 33330

Enter new mailing address, if applicable:

4661 SW 128TH AVE

(Mailing address MAY BE A POST OFFICE BOX)

SOUTHWEST RANCHES, FL 33330

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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:

DAI VAN TRAN

New Registered Office Address:

4661 SW 128TH AVE

Enter Florida street address

SOUTHWEST RANCHES

Florida 33330

City

Zip Code

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

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

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	DAI VAN TRAN	4661 SW 128TH AVE	<input checked="" type="checkbox"/> Add
		SOUTHWEST RANCHES, FL 33330	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	KHANH HUYNH	11201 SW 55TH ST UNIT 75	<input type="checkbox"/> Add
		MIRAMAR FLORIDA 33025	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	VAN HUYNH	11201 SW 55TH ST UNIT 75	<input type="checkbox"/> Add
		MIRAMAR FLORIDA 33025	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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