

LI1000046151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

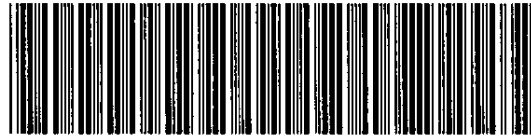
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN - 9 2014  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 6, 2012

LOI LE  
HL FAMILY NAILS LLC  
101 HOWLAND BLVD  
DELTONA, FL 32738

SUBJECT: HL FAMILY NAILS LLC  
Ref. Number: L11000046151

We have received your document for HL FAMILY NAILS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jeraline Saulsberry  
Regulatory Specialist II

Letter Number: 012A00026977

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HL Family Nails LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Hoang LE  
Name of Person

HL Family Nails LLC  
Firm/Company

9643 Tivoli Villa dr  
Address

Orlando FL 32829  
City/State and Zip Code

Hoangorlando@yahoo.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Hoang LE at (407) 484 0939  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee  
☐ \$30.00 Filing Fee & Certificate of Status  
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

HL Family Nails LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Page 1 of 3

**Authorized Member 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>
AMBR	Loi Le	1043 Andover point cir	<input type="checkbox"/> Add
		orlando FL 32825	<input checked="" type="checkbox"/> Remove
AMBR	Hoang Le	9643 Tivoli villa dr.	<input checked="" type="checkbox"/> Add
		Orlando FL 32829	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
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SECRETARY OF STATE  
FALLEN ASSOCIATION

2014 JAN 2 PM 12:55

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

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**  
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
\_\_\_\_\_  
Loi Se  
Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

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