11000052527

(Re	questor's Name)	
——————————————————————————————————————	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



900201414709

04/13/11--01020--002 **130.00

04/13/11--01020--00/

TIME STATE

B. BOSTICK
MAY - 4 2011
EXAMINED

COVER LETTER

Registration Section Division of Corporations

TO:

_{SUBJECT:} Reg	al Nails Salon&Spa	by Phu	ong&Van			
SUBJECT	Name of Limite					
The enclosed Article	s of Organization and fee(s) are s	ubmitted for fi	ling.			
Please return all corr	espondence concerning this matte	er to the follow	ring:			
My Phu	iong Tran					
		Name of Person				
Regal N	Nails Salon & Spa					_
		Firm/Company				
2951 S	. Blue Angel Pkwy					
		Address				
Pensaco	la, FL 32506					
		/State and Zip C	lode	ÄLt	<u> </u>	
typhun@	yahoo.com			<u> </u>		_=
	E-mail address: (to be used for	or future annual i	report notification)	AS	11 APR 29	É
For further informati	on concerning this matter, please	call:		ti.		7. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12
Angie Hawker		at (850	932-8410			y ra
Na	me of Person	Area C	ode & Daytime Tel	lephone Number	9.4	
Enclosed is a check	for the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	iling Fee & [Copy copy is enclosed)	\$160.00 Filin Certificate o Certified Co (additional cop	f Status & py	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Clifto 2661	tration Section from of Corporation Building Executive Centernassee, FL 32301	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Regal Nails Salon & Spa by Phuong&Van, L.L.C.. (Must end with the words "Limited Liability Company. "L.L.C.." or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
2951 S. Blue Angel Pkwy	3001 W. Lloyd St.
Pensacola, FL 32506	Pensacola, FL 32505

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Angie Hawker		ÄLL ALL		
	Name	至	ΑPR	يدهج عدا
955 Grand (Canal St.	ASS.	50 50 50 50	Taranana Eranarana Eranarananan Paranarananan Paranaranananananananananananananananana
Florida	a street address (P.O. Box <u>NOT</u> acceptable)	المارات. المارات. المارات.	-8- 	Der Controller 2 2 F
Gulf Breeze	_{FL} 32563	FLO	-	STEARING TO
	City, State, and Zip	AIE IRIDA	94:	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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 608, F.S..

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	My Phuong TRan	
	3001 W. Lloyd St. Pensacola, FL 32505	
MGRM	My Van TRan	
	2051 Stennis Dr.	
	Pensacola, FL 32506	LURIDA 29 AH III 47 LURIDA
(Use attachment if necessary)		
LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.)	an the date of filing: nust be specific and cannot be more than five	(OPTIO) business d

- Lhumid an

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Myphuma Thi TRan
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 14, 2011

MY PHUONG TRAN 2951 S. BLUE ANGEL PKWY PENSACOLA, FL 32506

SUBJECT: REGAL NAILS SALON & SPA BY PHUONG&VAN, L.L.C.

Ref. Number: W11000021083

We have received your document for REGAL NAILS SALON & SPA BY PHUONG&VAN, L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 611A00009110