## L11000052527

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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## COVER LETTER

TO:

TO: Registrat Division					
		BLUE ANGEL, LLC			
SUBJECT:	<u> </u>	Name of Linit	ted Liability Company		
The enclosed Artic	eles of A	mendment and fee(s) are subr	nitted for filing.		
Please return all co	orrespone	lence concerning this matter t	o the following:		
		My Phuong Tran			
		VIP NAIL OF BLUE ANGEL	Name of Person , LLC	·	
		2951 S Blue Angel Pkwy	Firm/Company		
		Pensacola, FL 32506	Address		
		myphuongtran65@gmail.com			
For further inform	ation cor	E-mail address: (t accrning this matter, please ca	o be used for future and	nual report notiti	cation)
My Phuong			850	382-8292	
<del></del> ;	Name of I	erson	at {	Daytime	Telephone Number
Enclosed is a chec	k for the	following amount:			
<b>É</b> \$25.00 Filing	Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing F Certified Copy (additional copy i	y	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registrat Division P.O. Box	GADDRESS: ion Section of Corporations 6327 icc, FL 32314	Regi: Divis Clift 2661	EET/COURIE stration Section sion of Corpora on Building Executive Cen hassee, FL 323	tions iter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIP NAIL OF BLUE ANGEL, LLC

VIP INAIL OF BLUE ANGEL, ELC		
(Name of the Limited L) (A.P.	Jability Company as it now appears on our records.) Torida Limited Liability Company)	•
'''	Can page	
The Articles of Organization for this Limited Liabil	lity Company were filed on 04/29/2011 and a	ssigned
Florida document number L11000052527	5	<i>2</i>
This amendment is submitted to amend the following	ng:	,
A. If amending name, enter the new name of the	 e limited liability company here:	19.
The new name must be distinguishable and contain the words	Limited Liability Company," the designation "LLC" or the abbreviation	1L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A)		
D	in their of the north	110
Enter new mailing address, if applicable:	COSS TO BLUEATER	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX		
	Pensacola, FL 325	26
B. If amending the registered agent and/or a registered agent and/or the new registered office	registered office address on our records, enter the name	e of the i
registered agent and/or the new registered office	- turios reje.	
Name of New Registered Agent:		
Name of New Registered Agent.		<del></del> -
New Registered Office Address:		
	Enter Florida street address	
_	Florida	
	City Zip Cont	le
New Registered Agent's Signature, if changing Regis	stered Agent:	
provisions of all statutes relative to the proper a accept the obligations of my position as registere	gent and agree to act in this capacity. I further agree to cound complete performance of my duties, and I am familiar wed agent as provided for in Chapter 605, F.S. Or, if this do istered office address, I hereby confirm that the limited liab ingc.	vith and cument is
	If Changing Registered Agent, <u>Signature of New Registered Ag</u>	<u>tent</u>
	Page 1 of 3	

	g Authorized Person(s) authorized to m from our records;	anage, enter the title, name, and address of each	person being a	
MGR = N $AMBR = A$	lanager Authorized Member			
<u>Title</u>	Name	Address	Type of Action	
MGR	My Phuong Tran	6293 Tributary St Pensacola, FL 32526		
			≝ Remove	
	0.0	215 chrisancha CT	D Change	
AMBR	DUNG LE TRAN	3115 chrisandra CT apensacola, FL 32526	<b>[X</b> Add	
			Remove	
			Change	
			□ Remove	
			Change	
			□ Add	
			□ Remove	
			□ Change	
			D Add	
			□ Remove	
			Change	
			□ Remove	
			Change	

If amending any ot	her information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)
· · · · · · · · · · · · · · · · · · ·		
		· <u></u>
<u></u>		
	··	
Effective date, if ot	her than the date of filing:	(optional)  mot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
If an effective date is list Note: If the date inse	ed, the date must be specific and cah erted in this block does not meet	mot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.07 the applicable statutory filing requirements, this date will not be listed
document's effective	date on the Department of State	s records.
he record specifie	s a delayed effective date ter the record is filed.	e, but not an effective time, at 12:01 a.m. on the earlier
The sould day al	ter the record is med.	
Dated		
	·	
		ledy
	Signature of a men	ber or authorized representative of a member
	.Tu	INC-LETBAN ped or primed name of signee
	Ty <sub>i</sub>	ped or primed name of signee
		Page 3 of 3

Filing Fee: \$25.00