

L110000082681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special instructions to Filing Officer:

Office Use Only



600201614896

04/25/11--01038--010 **78.75

07/18/11--01013--015 **51.25

T. CLINE

JUL 19 2011

EXAMINER

SECRETARY OF STATE
FLORIDA

2011 JUL 18 AM 10:10

FILED

July 6, 2011

2100 North 9th Ave. Suite 635
Pensacola, FL 32504

Florida Department of State
Division of corporation
P.O. Box 6327
Tallahassee, FL 32314

Dear sir,

Enclosed are our applications to be LLC and fees

In April we sent applications to be incorporate but was denied due our business names. We later sent in the corrections but still did not receive any feedback from your department.

- We have decided to be LLC instead of Corporations.
- Since we have already paid \$78.75 each for two application, we are sending the difference between LLC fee and the amounts paid.

Along with this letter and applications, please find a check for \$102.5 ($\$260.00 - \$157.50 = \102.5) as the additional fee and copies of your denial letter.

If you have any question, please call Angie Hawker at 850-932-8410

Sincerely,


Angie Hawker

*2 checks.
51.25 each*

FILED
2011 JUL 18 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ARTISTIC NAILS SALON, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Ngoc Han Nu Hoang

Name of Person

Tip N Toe, Inc.

Firm/Company

5100 North 9th Ave., Suite 635

Address

Pensacola, FL 32504

City/State and Zip Code

typhun@yhoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angie Hawker

Name of Person

at (850) 932-8410

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 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

FILED
2018 JUL 18 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Artistic Nails Salon, LLC

(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:

5100 North 9th Ave,
Suite 1213
Pensacola, FL 32504

Mailing Address:

Same as Office Address

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:

Ngoc Han Nu Hoang

Name

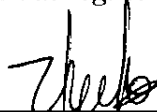
6615 Tippin Ave

Florida street address (P.O. Box **NOT** acceptable)

Pensacola, FL 32504

City, State, and Zip

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.



Registered Agent's Signature (REQUIRED)

FILED
JUN 18 AM 10:10
CLERK OF STATE
TALLAHASSEE, FLORIDA

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Ngoc Han Nu Hoang

6615 Tippin Ave

Pensacola, FL 32504

MGrM

Luu Hoa Thi Pham

1025 Meyer Way

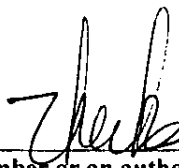
Pensacola, FL 32514

(Use attachment if necessary)

ARTICLE V: 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 five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

Ngoc Han Nu Hoang

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)

2011 JUL 18 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED