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SECRETARY OF STATE
TALL AMASSEE ELOBERA

J. BRYAN

JAN 31 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co			•
SUBJECT:	EMERALD N	NAILS & TAN, LLC.	
30200011		ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		HAIT PHAM	
		Name of Person	1, 2
	EMEF	EMERALD NAILS & TAN, LLC.	
		Firm/Company	H 3
	24	429 S. ORANGE AVE	TILLE SEE
		Address	
	C	ORLANDO, FL 32806	POLZ JAN 30 PH 3: 20 PROPERTING OF STATE TALL AHASSEE, FLORID
		City/State and Zip Code	P
	JOB_C E-mail address: (ONNECTION@MSN.COM to be used for future annual report notifical	tion)
For further information	concerning this matter, please of	call:	
	HAI T PHAM		49-7576
Name	of Person	Area Code & Daytime	Felephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis	LING ADDRESS:	STREET/COURIER ADDRESS: Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EMERALD	NAILS & TAN, LL	<u>C</u>	
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appea mited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Cor	mpany were filed on	12/19/2011	and assigned
Florida document numberL11000141973	J.		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company her	<u>re</u> :	
		22.1 1 2 22	, <u>p</u>
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Comp.	any," the designation "i	FIGURE 13
Enter new principal offices address, if applicable:			F. F. 33 1.
(Principal office address MUST BE A STREET ADDRE	<u> </u>		平 3
			25 %
Enter new mailing address, if applicable:			P P
(Mailing address MAY BE A POST OFFICE BOX)			
			·
B. If amending the registered agent and/or registered agent and/or the new registered office addre		our records, <u>enter t</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	7: C - L-
	Citv		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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action **MGRM** THU M NGUYEN 2429 S. ORANGE AVE ☐ Add ORLANDO, FL 32806 Remove **MGRM** MY TRAN 2429 S. ORANGE AVE ✓ Add ORLANDO, EL 32806 Remove ☐ Add Remove Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ____ JANUARY 16 2012 Signature of a member or authorized representative of a member HAIT PHAM Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00