## L11000145100

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SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

TO:	Registration S Division of Co	Section orporations		
SUBJE	ECT:	In'Dulgeno	ce Nail Spa "LLC"	
			ited Liability Company	
The en	closed Articles o	f Amendment and fee(s) are sul	omitted for filing.	
Please	return all corresp	oondence concerning this matter	to the following:	
			Rick Tran Name of Person	
			Firm/Company	
			5664 110th Ave	
			Address	
		Pi	nellas Park, FL 33782	
		•	City/State and Zip Code	
		E-mail address: (	nrick2007@yahoo.com to be used for future annual report notific	eation)
For fun	ther information	concerning this matter, please of	all:	
		Rick Tran	at (	121-9962
	Name	of Person	Area Code & Daytime	Telephone Number
Enclose	ed is a check for	the following amount:		
<b>[</b> ]\$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)
	Regisi Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 JAN 11 PH 12: 15

	ENCE NAIL SPA "LLC		
( <u>Name of the Limited Lia</u> (A Flo	<b>bility Company as it now appea</b> orida Limited Liability Company)	rs on our records.)	<del></del>
The Articles of Organization for this Limited Liabi	lity Company were filed on	12/27/2011	and assigned
Florida document numberL1100014510			
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company her	<u>·e</u> :	
The new name must be distinguishable and end with th	e words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	DDRESS)		<u> </u>
Future and the state of the sta			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	0	our records, <u>enter t</u>	he <u>name of the new</u>
Name of New Registered Agent:			
New Registered Office Address:	En	ter Florida street addı	·ess
	Florida		
_	City	, riorida	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 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							
<u>Title</u>	Name	Address	Type of Action				
MGR	Rick Tran	5664 110th Ave Pinellas Park, FL 33782	✓ Add Remove				
<del></del>			Add Remove				
<del></del>			Add Remove				
			Add Remove				
			Add Remove				
	<del></del>		Add Remove				
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)					
	M/2012		SECRETARY OF STATE DIVISION OF CORPORATIONS				
	RIC	or authorized representative of a member					

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Filing Fee: \$25.00