12000069645

(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



700393239057

08/29/22--01034--013 ************

EN2 II 9 02 211 20 14.2

C 200 120/00

COVER LETTER

Division of Corporations					
SUBJECT: <u>THE</u>	POLISHED NA Name of Limit	CLLS & DAY SPA, LL cd Liability Company	• "		
The enclosed Articles of Arm					
Please return all corresponder	nce concerning this matter to	o the following:			
· ·	Christopher	J. Guasp Name of Person			
	Firm/Company				
	22940 VISTA EDERA CIR, UNIT # 1305				
	Estero, FL. 33928 City/State and Zip Code				
-	E-mail address: (to be used for future annual report notification)				
For further information conc	·				
Christopher	J. Guasp	at (<u>796</u>) <u>302</u> . 994 Area Code Daytime Te	7 /		
Name of Pe		Area Code Daytime Te	lephone Number		
Enclosed is a check for the f	ollowing amount:		/		
□ \$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)		
Mailing Address:		Street Address:			

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

TO: Registration Section

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE POLISHED NAILS		
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records ability Company)	t-5 ₽)
The Articles of Organization for this Limited Liability Company w	vere filed on	2012 : and assigned
Florida document number 112000069645		623
This amendment is submitted to amend the following:		29 PH 2:43
A. If amending name, enter the new name of the limited liabil	ity company here:	- (V)
THE NAIL BOUTIQUE & SPA The new name must be distinguishable and contain the words "Limited Liability".	, LLC	
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9924 GULF C	
(Principal office address MUST BE A STREET ADDRESS)	A 100 , STUDIO F.T. MYars,	#24
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	22940 Vista E UNIT # 1305 Estero, FL. 33	Dera Cir.
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	ss
	, FI	orida
	City	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	NGUYEN, VAH H. MS	9924 GAIF COAST Main Street A	<i>106</i> □ Add
		STU013 # 24	Remove
		Fr. Myers, FL, 33913	⊠ Change
MGR	GUASD, Christopher J. MR	9924 GULF Coast Main Street Al	<i>00</i> □Add
		STUDIO #24	□Remove
		FT. Myers, FC. 33913	
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
			FT 65

					<u>_</u>	<u> </u>			
			<u> </u>						
_									
		<u> </u>							
_									
							_		
_								202	
								2 AUG	
						<u>. – </u>	<u> </u>	629	:
_									1:
_							1.1 1 1 1 - 1	5.7	٠.
							'1	<u> ယ</u>	
_					_ -				
_									
-									
Effectiv	e date, if other	r than the date	of filing:			(option	nal)	(0)	- 034
Affan effed	f the date inserte	ed in this block d	pecific and cannot to oes not meet the ment of State's re	applicable stati	lding or more that itory filing requ	n 90 days after 1 irements, this	iung.) rursi date will t	not be list	ed a
Note: I	in s cricciive da			ctive time, at 12	2:01 a.m. on the	earlier of: (b)	The 90th	h day afte	r th
Note: 15 document	specifies a delay	yed effective date	e, but not an effe	,					

Certified Copy

I certify the attached is a true and correct copy of the Articles of Organization of THE POLISHED NAILS & DAY SPA, LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on May 23, 2012, as shown by the records of this office

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L12000069645.

Authentication Code: 120523161912-200235374242#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty Third day of May, 2012

THE STATE OF THE S

Ken Detiner Secretary of State



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Limited Liability Company
THE POLISHED NAILS & DAY SPA, LLC

Filing Information

Document Number

L12000069645

FEI/EIN Number

46-0915937

Date Filed

05/23/2012

State

FL

Status

ACTIVE

Last Event

REINSTATEMENT

Event Date Filed

05/01/2014

Principal Address

21740 S. TAMIAMI TRAIL - SUITE #114

ESTERO, FL 33928

Changed: 01/07/2015

Mailing Address

21740 S. TAMIAMI TRAIL - SUITE #114

ESTERO, FL 33928

Changed: 01/07/2015

Registered Agent Name & Address

FLORIDA INCORPORATOR

619 CATTLEMEN RD - SUITE O11

SARASOTA, FL 34232

Authorized Person(s) Detail

Name & Address

Title MGRM

NGUYEN, VAN H, MS

21740 S. TAMIAMI TRAIL - SUITE #114

ESTERO, FL 33928

Title MGRM

GUASP, CHRISTOPHER J, MR

21740 S. TAMIAMI TRAIL - SUITE #114 ESTERO, FL 33928

Annual Reports

Report Year	Filed Date
2020	01/15/2020
2021	02/01/2021
2022	01/31/2022

Document Images

01/31/2022 ANNUAL REPORT	View image in PDF format
02/01/2021 - ANNUAL REPORT	View image in PDF format
01/15/2020 - ANNUAL REPORT	View image in PDF format
01/30/2019 ANNUAL REPORT	View image in PDF format
01/23/2018 ANNUAL REPORT	View image in PDF format
01/12/2017 - ANNUAL REPORT	View image in PDF format
03/02/2016 - ANNUAL REPORT	View image in PDF format
01/07/2015 ANNUAL REPORT	View image in PDF format
05/23/2012 - Florida Limited Liability	View image in PDF format