

L12 000 141 540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

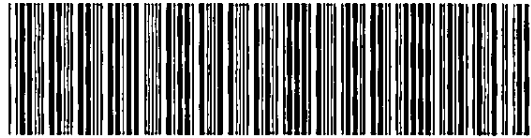
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000345647570

06/04/20--01003--015 **25.00

FILED
2020 JUN -4 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FL

JUN 20 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BA Nails LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Cuc Anh T Luu

Name of Person

BA Nails LLC

Firm/Company

8099 Bautista Way

Address

Palm Beach Gardens FL 33418-8179

City/State and Zip Code

Calicodevelopmentllc@gmail.com

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

For further information concerning this matter, please call:

Amylou N Le

Name of Person

954 554-0367
at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 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 Address:

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**

Ba Nails LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on November 08, 2012 and assigned
Florida document number L12000141540.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8099 Bautista Way

Palm Beach Gardens FL 33418-8179

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8099 Bautista Way

Palm Beach Gardens FL 33418-8179

FILED
JUN - 4 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FL

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Amylou N Le

New Registered Office Address:

5801 Colbright Road

Enter Florida street address

Lake Worth


City

Florida 33467

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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Type of Action</u>
MGR	Cuc Anh T Luu	8099 Bautista Way	<input checked="" type="checkbox"/> Add
		Palm Beach Gardens FL 33418-8179	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Faustin Fenelus	2790 NW 11th Court	<input type="checkbox"/> Add
		Fort Lauderdale FL 33311	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Amylou N Le	5801 Colbright Road	<input checked="" type="checkbox"/> Add
		Lake Worth FL 33467	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
 2020 JUN -4 AM 9:25
 SECRETARY OF STATE
 TALLAHASSEE, FL

FILED
2020 JUN -4 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2020 JUN -4, AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FL

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated May 29th, 2020

Amylou N Le,

Typed or printed name of signee