

213000137777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

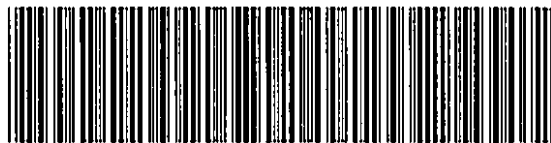
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUL 20 PM 12: 38

N COOPER

JUL 31 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 22, 2018

CHE LE  
8056 WEST MCNAB ROAD  
NORTH LAUDERDALE, FL 33068 US

SUBJECT: FIRST NAILS SPA, LLC  
Ref. Number: L13000137777

We have received your document for FIRST NAILS SPA, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$30.00.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 118A00013090

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2018 JUL 20 PM 12:35  
CORPORATION  
DIVISION OF STATE

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** FIRST NAILS SPA, 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:

CHE LE  
Name of Person  
FIRST NAILS SPA LLC  
Firm/Company  
8056 WEST MCNAB ROAD  
Address  
NORTH LAUDERDALE, FL 33068  
City/State and Zip Code  
E-mail address: (to be used for future annual report notification)

RECEIVED  
2018 JUN 22 AM 10:56  
DEPARTMENT OF  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

For further information concerning this matter, please call:

NGA NGUYEN at 786 797-4921  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following 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:**  
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

No \$

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FIRST NAILS SPA, 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 09/30/2013 and assigned Florida document number L13000137777.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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DIVISION OF CORPORATIONS  
18 JUL 20 PM 12:38

**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:

NGA NGUYEN

New Registered Office Address:

1406 SW 83RD AVE

*Enter Florida street address*

NORTH LAUDERDALE

Florida

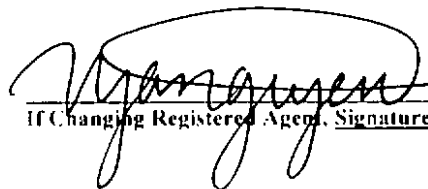
33068

*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 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>
MGRM	CHE LE	1409 SW 82ND TERRACE	<input type="checkbox"/> Add
		N. LAUDERDALE, FL 33068	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NGA NGUYEN	1406 SW 83RD AVE	<input checked="" type="checkbox"/> Add
		N. LAUDERDALE, FL 33068	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HUE T. LE	1212 SW 81ST TERRACE	<input checked="" type="checkbox"/> Add
		N. LAUDERDALE, FL 33068	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

AMEND TO ADD TWO NAMES: NGA NGUYEN AND HUE T. LE

AND REMOVE THE NAME OF CHE LE

Multiple horizontal lines for additional amendments.

18 JUL 20 PM 12:38

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DIVISION OF CORPORATIONS

E. Effective date, if other than the date of filing: 06/01/2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated June 16, 2018

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

CHE LE  
\_\_\_\_\_  
Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 22, 2018

CHE LE  
8056 WEST MCNAB ROAD  
NORTH LAUDERDALE, FL 33068 US

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