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SECRETARY OF STATE
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D. SCOTT DEC 2 0 2016

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: V K NAILS LLC		
Name	e of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted	for filing.
Please return all correspondence concerning this	s matter to the following:	
HOANG MINH HO		
Name of Person		
V K NAILS LLC		
Firm/Company		
3456 N. UNIVERSITYDR		
Address	_	
SUNRISE, FL 33351		-100
City/State and Zip Code		ALCON SE T
CHIM4EM5@YAHOO.COM		
E-mail address: (to be used for future annu	al report notification)	STEED OF THE
For further information concerning this matter,	please call:	19 PH 4: 22
HOANG MINH HO	773 6293637	22
Name of Person		time Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	amount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Cert	ified Copy
INHS18 (2/14)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ume of the limited liability company: VK NAILS LI	LC	
2. (a)	3456 N UNIVERSITY DR SUNRISE, FL 333	.51 _(b) 34	156 N UNIVERSITY DR SUNRISE, FL 3:
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3456 N UNIVERSITY DR SUNRISE,	34	56 N UNIVERSITY DR SUNRISE,
	FL 33351		. 33351
	11/24/2014	L1	4000181786
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	HAU MINH HO - PRESIDENT		
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dep	of State:
	Registered Office Address (MUST BE FLORIDA STREET) 3456 N UNIVERSITY DR	ADDRESS)	
	SUNRISE , FL	33351	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Office address	· · · · · · · · · · · · · · · · · · ·
	HOANG MINH HO - P & MINH TRAN - VP		
	NEW Registered Office Address:		FILEE
	3456 N UNIVERSITY DR		SEE OF D
	SUNRISE , FL	33351	PH # 22
the cha agent v was/wa	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of organization or the operating agreement of the	f the registere ability compa of the limited climited liabi	e of Florida, it is hereby confirmed that after d office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
Signa	ture of a member or authorized representative of a member	TIOAIN	Printed or typed name of signee
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in t performance d for in Chap hereby confir	his capacity. I further agree to comply with the
Signatu	ire of Registered Agent		