L14000189475

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J. HARRIS

COVER LETTER

	on or Corp			
SUBJECT:	erd Nails I		ited Liability Company	
The enclosed A	rticles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return al	l correspor	ndence concerning this matter	to the following:	
		Brandon Diamond		
			Name of Person	
		Nerd Nails LLC		
			Firm/Company	
		10227 Quito Street		
			Address	
		Cooper City, FL 33026		
			City/State and Zip Code	
		brandon@nerdnails.com		
		E-mail address: (to be used for future annual report notific	cation)
For further info	rmation ec	oncerning this matter, please ca	all:	
Brandon Diamo	ond		407 394-6943 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a ch	heck for th	e following amount:		
■ \$25.00 Filin	ng 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:

TO:

Registration Section

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

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

Nerd Nails LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	inv as it now appears on our records Liability Company)	
The Articles of Organization for this Limited Liability Company Torida document number L14000189475	were filed on 12/11/2014	and assigned
		
his amendment is submitted to amend the following:		
. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
		Paralla de la Car
ne new name must be distinguishable and contain the words "Limited Liabi	•	or the appreviation "L.L.C.
nter new principal offices address, if applicable:	10227 Quito Street	
Principal office address MUST BE A STREET ADDRESS)	Cooper City, FL 33026	
		<u>ت</u> يوسد
nter new mailing address, if applicable:	10227 Quito Street	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	Cooper City, FL 33026	<u> </u>
mading watess may be a rost office box)		
		- 3 &
. If amending the registered agent and/or registered o egistered agent and/or the new registered office address her		, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	;
		rida Zip Code
	City	гір Соае
ew 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>	Address	Type of Action
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			□ Remove
			□ Change
			□ Add
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an effective date is listed, ote: If the date inserte	the date must be speced in this block doe	cific and cannot be prior is not meet the applic	to date of filing or more able statutory filing re	than 90 days after filir quirements, this da	ng.) Pursuant to 605.020 te will not be listed a
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Brandon Dia	mond 				95 T
		Typed or print	ed name of signee		8 €

Page 3 of 3

Filing Fee: \$25.00