

L15000029523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

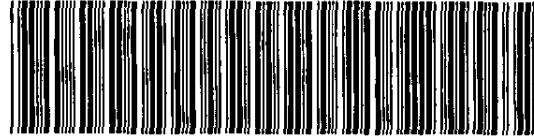
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 11 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Anice Nail Lacquer
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:

Aniel Brown
Name of Person
Anice Nail Lacquer
Firm/Company
303 N. Brunnell Pkwy Apt #51
Address
Lakeland, FL 33815
City/State and Zip Code
aniceb2015@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aniel Brown at (863) 255.4482
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

Arice Nail Lacquer Inc

The Articles of Organization for this Limited Liability Company were filed on 2/26/15 and assigned Florida document number 47-3246010 L15000029523.

Shawty Ten LLC

303 N. Brunnell Pkwy
Apt. 51
Lakeland, FL 33815

SECRET
TALLAHASSEE, FLORIDA
16 MAR 70 PM 1:12
OFFICE OF STATE
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>
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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16 MAR 19 PM 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

[illegible]

E. Effective date, if other than the date of filing: _____ (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 3/8/2016;

Aug. B. [Signature]

Signature of a member or authorized representative of a member

Ariel Brown

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA