U15000123126

(Re	questor's Name)	· · ·
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

FILED

HAR 29 2016 LIKUCE

COVER LETTER

TO: Registration So Division of Cor			
	BAR AND SPA L.L.C.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Howard A Speigel		
		Name of Person	
	Howard A. Speigel, P.A.		
		Firm/Company	
	1801 Lee Rd., Suite 265		
		Address	
٦	Winter Park, Florida 3278	9	
•		City/State and Zip Code	
	hspeigel@yahoo.com		,
	E-mail address: (to be used for future annual report notifica	tion)
For further information of	oncerning this matter, please c	all:	2016 MAR SEGRETA
Howard A. Speigel		407 6475700 at ()	MAR 2
	f Person	Area Code Daytime To	BRETAILY BE STATELED 2:
Enclosed is a check for t			5A = 5
\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLO NAIL BAR AND SPA L.L.C			
(Name of the Lim	ited Liability Company as it (A Florida Limited Liability	now appears on our records. Company)	
The Articles of Organization for this Limited I		filed on <u>07/17/2015</u>	and assigned
Florida document number L15000123126	,		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability c	ompany here:	
THE NAIL BAR AND SPA LLC			•
The new name must be distinguishable and contain the	words "Limited Liability Cor	npany," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cahla.		
• • • • • • • • • • • • • • • • • • • •	_ 		
(Principal office address MUST BE A STRE)	<u>ET ADDKESS)</u>		=======================================
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOX)		
			201 SE
B. If amending the registered agent and	l/or registered office s	ddress on our records	enter the namerofathe new
registered agent and/or the new registered of		duress on our records,	TEN A
			SSR 2
Name of Name Designation of Assess	KHEM XAYAVONG	,	
Name of New Registered Agent:			
New Registered Office Address:	5300 Dover Village L	ane #1	STA:
-		Enter Florida street address	DA DE
	Orlando	. Flor	ida <u>32812</u>
			Zin 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 gent, 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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Change
			Remove
			Change
			Add
			Remove
			Change
			ZOIS Add
	•		Remove
			Change
			, Add
			□ Remove
			☐ Change
			Add
			Remove
			Change

*	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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T) CC	ORITAL CONTRACTOR OF THE CONTR	
Note	ive date, if other than the date of filing:	207 (as t
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of:
_	March 24, 2016	
Date	March 24, 2016 ,	
	Signature of the or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00