LIL 0000 18900

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

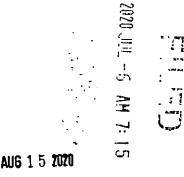


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AUG 1 5 2020 S. YOUNG

COVER LETTER

TO: Registration Section

Division of Cor	porations		
INFINITY	NAIL SPA OF SUNRISE LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	NHIEN VO		
	-	Name of Person	
	INFINITY NAIL SPA OF	SUNRISE LLC	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	1116 W SUNRISE BLVD		
		Address	
	FORT LAUDERDALE, F	L 33311	
		City/State and Zip Code	
	BLACKIZAL@GMAIL.CO	OM to be used for future annual report not	ification)
For further information c	oncerning this matter, please c		
NHIEN VO		954 5333820	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 S Division of C	Section Torporations	<u>Street Address:</u> Registration Se Division of Co	rporations
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monro	Fallahassee Se Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INFINITY NAIL SPA OF SUNRISE 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 $\frac{01/27/2016}{1}$ Florida document number _____16000018900 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 "LLC." 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) 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: New Registered Office Address: Enter Florida street address _, Florida

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:

Type of Action

MGR = Manager

AMBR = Auti	orized Member	
<u>Title</u>	<u>Name</u>	Address
MGR	GIANNA NGUYEN	1116 W SUNRISE BLVD

MGR	GIANNA NGUYEN	1116 W SUNRISE BLVD	□Add
		FORT LAUDERDALE, FL 33311	≣ Remove
			□Change
MGR	DUNG ANH VAN	3406 WILLOW ST	= Add
		FORT LAUDERDALE, FL 33311	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			∐Add
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		07/01/2020			
Effective date, if other that fan effective date is listed, the da	the date of filing	Econot be prior to	date of filing or more	(optiona	l) ng 1 Pursuant to 605-0207.
Note: If the date inserted in the	nis block does not n	neet the applicab	le statutory filing re	quirements, this da	te will not be listed as
document's effective date on t	he Department of S	itate's records.			
			12.01		m 004 1 3 4
e record specifies a delayed ef	ective date, but not	an effective time	e, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
rd is filed.					
rd is filed.					
01 1111 5		2020			
rd is filed. O1 JULY Dated		2020	.•		
01 1111 5			ved representative of		

Filing Fee: \$25.00