

**L16000208188**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

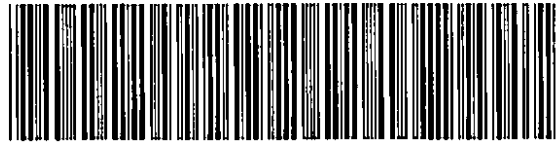
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 AUG 31 AM 8:19

N COOPER

SEP 07 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Nail Boutique & Spa Vero Beach, LLC

\_\_\_\_\_  
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:

No Thi Le

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

1275 US Highway 1, Unit 5

\_\_\_\_\_  
Address

Vero Beach, FL 32960

\_\_\_\_\_  
City/State and Zip Code

struong2506@yahoo.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

No Thi Le

386

264-1387

at ( )

\_\_\_\_\_  
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

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

Nail Boutique & Spa Vero Beach, 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 11-24-2016 and assigned  
Florida document number L16000208188.

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 "L.L.C."

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)

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**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:

Van P. Nguyen

New Registered Office Address:

15250 South Tamiami Trail Suite 111

*Enter Florida street address*

Fort Myers

Florida 33908

*City*

*Zip 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.*

*Van P. Nguyen*  
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>	<u>Address</u>	<u>Type of Action</u>
MGR	Anh Thi Nguyen	1275 US Highway 1, Unit 5	<input type="checkbox"/> Add
		Vero Beach, FL 32960	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Thanh Le	5220 US Highway 1, Unit 103	<input type="checkbox"/> Add
		Vero Beach, FL 32960	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	No Thi Le	1275 US Highway 1, Unit 5	<input checked="" type="checkbox"/> Add
		Vero Beach, FL 32960	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

DIVISION OF CORRECTIONS  
18 AUG 31 AM 8:19

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DIVISION OF CORPORATION  
18 AUG 31 AM 8:19

(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.

Dated May 17, 2018

*Thorne*  
Signature of a

Signature of a member or authorized representative of a member

No Thi Le - Member

Typed or printed name of signee