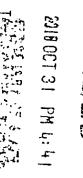
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(Requestor's Name)
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COVER LETTER

	istration Se ision of Cor			
SUBJECT:	EZ Nail LL	С		
Sobster.		Name of Lim	ited Liability Company	
The enclosed	Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Kenneth D Tillett		
		EZ Nail LLC	Name of Person	
		5022 W Atlantic Ave	Firm/Company	
		Delray Beach, FL 33484	Address	
		kdtillett09@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For further in	iformation co	oncerning this matter, please co	all:	
Kenneth D T			615 521-5677 at ()	
	Name of	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling 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

EZ Nail LLC		
(<u>Name of the Limite</u>	d Liability Company as it now appears on our record A Florida Limited Liability Company}	<u>s.</u>)
The Articles of Organization for this Limited Lis Florida document number <u>CE 10008681</u>		and assigned
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
Same name: EZ Nail LLC		
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC	or the abbreviation L.L.C."
Enter new principal offices address, if applica	ble: same as current	00 1
Principal office address MUST BE A STREE	[ADDRESS]	ω [
		- The Part of the
Enter new mailing address, if applicable:	same as current	
Mailing address MAY BE A POST OFFICE I	(OX)	· Cap.
B. If amending the registered agent and/oregistered agent and/or the new registered of		s. enter the name of the nev
Name of New Registered Agent:	n/a	
New Registered Office Address:	Enter Florida street addres	SS .
	Emer Frontie so cel dances	•
	City:	orida

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	Phat Nguyen	5022 W Atlantic Ave, Delray Beach, FL 33484	
			Remove
			Change
	Phuong Nguyen	5022 W Atlantic Ave. Delray Beach, FL 33484	Add
			■ Remove
			☐ Change
MGR	Thao T Nguyen	5022 W Atlantic Ave, Delray Beach, FL 33484	■ Add
			□ Remove
AMBR	Kenneth D Tillett	5022 W Atlantic Ave, Delray Beach, FL 33484	Add €
			Remove
			Trit.
			□ Change
			Add
		<u></u>	Remove
			☐ Change
		<u> </u>	□ Add
			Remove
			Change

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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing requi	(optional) 190 days after filing.) Pursuant to 605.0 rements, this date will not be listed
document's effective date on the Department of State's records.	
ne record specifies a delayed effective date, but not an effective time, a The 90th day after the record is filed.	at 12:01 a.m. on the earlier o
Dated October 30 2018	
Signature of a member or authorized representative of a me Phat Nauyan Typed or printed name of some	ember

Page 3 of 3

Filing Fee: \$25.00