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> S. WARREN SEP 0 7 2017

COVER LETTER

TO:		istration Se ision of Cor		
cup II	·cr.	HOLISTIC	NAIL & SPA LLC	
SUBJECT: Name of Lin			Name of Lin	nited Liability Company
			1	
The end	closed	l Articles of	Amendment and fee(s) are sub	omitted for filing.
Please	return	ail correspo	ndence concerning this matter	to the following:
			KHANH LE	
				Name of Person
			HOLISTIC NAIL & SPA	LLC
				Firm/Company
			2200 GLADES ROAD 1	06
				Address
			BOCA RATON, FL 3343	l
				City/State and Zip Code
			KHANHLE12390@YAHO	to be used for future annual report notification)
Dan Com	يدا يريان	Commention a		•
ror iuri	ner in	потпацов с	oncerning this matter, please o	
KHANH LE		<u> </u>	954 319-5800 at ()	
		Name o	l'Person	Area Code Daytime Telephone Number
Enclose	ed is a	check for th	e following amount:	
■ \$25	5.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 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		ation Section n of Corporations ox 6327	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOLISTIC NAIL SPAILLC	
(Name of the Limited Liability C	Company as it now appears on our records.)
(A Florida Ui	mited Liability Company)
m a transfer of the Comment of the C	npany were filed on 08/25/2017 and assigned
The Articles of Organization for this Limited Liability Com	npany were filed on and assigned
Florida document number L17000182540	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
HOLISTIC NAIL & SPA LLC	
he 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:	2200 GLADES ROAD 106
Principal office address MUST BE A STREET ADDRES	S.S) BOCA RATON, FL 33431
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
,	
	TAR 1
	red office address on our records, enter the name of the n
egistered agent and/or the new registered office addres	s here:
	多数 よ 戸
Name of New Registered Agent: KHANH	
1247 013	D BOYNTON RD
New Registered Office Address: 4267 OLI	Enter Florida street address
	3×
BOYNTO	ON BEACH, Florida 33436
	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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amendin	• Authorized Person(s) authoriz	ed to mar	nage, enter the title, name, and address	of each person being added
or removed	I from our records:			•
MGR = A AMBR = A	vlanager Authorized Member			·
<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	LE. KHANH		4267 OLD BOYNTON RD] S≫Add
		1	BOYNTON BEACH, FL 33436	☐ Remove
				□ Change
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D. If amending any other information, enter	change(s) here: (Attach additional sheets, if necessor	ny.j
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		•
E. Effective date, if other than the date of fil	09/01/2017 ing: (optiona	.1)
(If an effective date is listed, the date must be specific a	and cannot be prior to date of filing or more than 90 days after filing meet the applicable statutory filing requirements, this da	ng.) Pursuant to 605,0207 (3)(b)
document's effective date on the Department o		
If the record specifies a delayed effective (b) The 90th day after the record is file	diate, but not an effective time, at 12:01 a.m	i. on the earlier of:
		7 SE
Dated 09/28/17	<u> </u>	THE PLANE
	Way Car	FILED P-5 PM IASSEE,
Signature of	a member or authorized representative of a member	- FS O
KHAN	1 / 6	: 20
Viuit	Typed or printed name of signee	
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	Page 2 of 2	

Page 3 of 3

Filing Fee: \$25.00