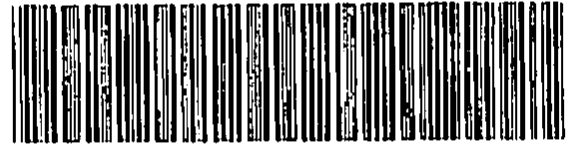


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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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2019 MAR 18 P 3 16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. LEMBOUX

MAR 27 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAVID & COMPANY. HAIR & NAILS & SPA GROUP LL.C.
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:

NGOC MAI NGUYEN

Name of Person

DAVID & COMPANY. HAIR & NAILS & SPA GROUP LL.C.

Firm/Company

13800 S. JOG RD., SUITE 107

Address

DELRAY BEACH, FL 33446

City/State and Zip Code

ANDYANDREWVI@ATT.NET

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

For further information concerning this matter, please call:

NGOC MAI NGUYEN OR ANDY NGUYEN 561 818-5717
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

DAVID & COMPANY, HAIR & NAILS & SPA GROUP L.L.C.

FILED

(Name of the Limited Liability Company as it now appears on our records) 2018 HAIR & NAILS & SPA GROUP L.L.C. P 3:15
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/16/2019 at TALLAHASSEE, FLORIDA and assigned Florida document number L18000070622

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DIVA & COMPANY, HAIR NAILS & SPA GROUP L.L.C.

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:

13800 S. JOG RD, SUITE 107

(Principal office address MUST BE A STREET ADDRESS)

DELRAY BEACH, FL, 33446

Enter new mailing address, if applicable:

13818 PADDOCK DR

(Mailing address MAY BE A POST OFFICE BOX)

WELLINGTON, FL, 33414

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:

ANDY NGUYEN

New Registered Office Address:

13818 PADDOCK DR

Enter Florida street address

WELLINGTON

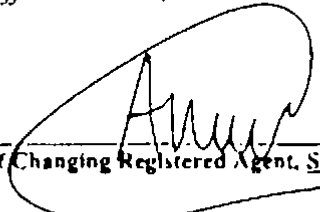
Florida 33414

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.


Andy 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>
AR	JENNY C NGUYEN	13818 PADDOCK DR	<input checked="" type="checkbox"/> Add
		WELLINGTON, FL 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	ANDY NGUYEN	13818 PADDOCK DR	<input checked="" type="checkbox"/> Add
		WELLINGTON, FL 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LAM D NGUYEN	106 CHESTNUT CT	<input type="checkbox"/> Add
		ROYAL PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Lined area for amending information.

E. Effective date, if other than the date of filing: _____ (optional)

(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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated MARCH 16

2019

Handwritten signatures of NGOC MAI NGUYEN and JENNY C NGUYEN.

Signature of a member or authorized representative of a member

NGOC MAI NGUYEN and JENNY C NGUYEN

Typed or printed name of signer