

L18000264898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

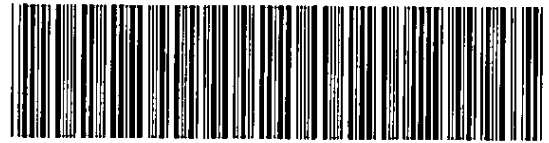
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: NAILLYWOOD AND SPA, 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:

CHARLES TAI

Name of Person

NAILLYWOOD AND SPA, LLC

Firm/Company

1036 S 6TH AVE

Address

WAUCHULA, FL 33873

City/State and Zip Code

ccssshd_07@yahoo.com

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

For further information concerning this matter, please call:

CHARLES TAI

571

409-3449

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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	CHARLES TAI	1036 S 6TH AVE	<input type="checkbox"/> Add
		WAUCHULA, FL 33873	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	HELEN PHUNG	1036 S 6TH AVE	<input type="checkbox"/> Add
		WAUCHULA, FL 33873	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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