

L18000267459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

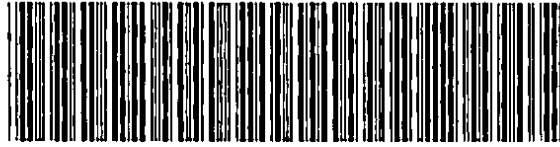
(Document Number)

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Special Instructions to Filing Officer:

3/11/21

Office Use Only



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01/07/21--01004--011 **25.00

FILED

2021 MAR 11 PM 6:06

SECRETARY OF STATE
TALLAHASSEE, FL

3/17/21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 FEB 16 10:15

February 16, 2021

MAI T. NGUYEN
6434 MASSACHUSETTS STREET
NEW PORT RICHEY, FL 34653

SUBJECT: MYNAIL 1 LLC
Ref. Number: L18000267489

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 221A00003465

COVER LETTER

Registration Section
Division of Corporations

MYNAIL 1 LLC

SUBJECT: _____
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAI T. NGUYEN

Name of Person

MYNAIL 1 LLC

Firm/Company

6434 MASSACHUSETTS STREET

Address

NEW PORT RICHEY, FL 34653

City/State and Zip Code

NGUYENYANNI2@GMAIL.COM

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

For information concerning this matter, please call:

NGUYEN

727

495-3106

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

is a check for the following amount:

☐ \$0 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2021 MAR 11 PM 6:06

MYNAIL LLC

(Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company))

SECRETARY OF STATE
TALLAHASSEE, FL

Articles of Organization for this Limited Liability Company were filed on 11/15/2018 and assigned
document number 1.18000267489.

Amendment is submitted to amend the following:

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

name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

new principal offices address, if applicable:

principal office address MUST BE A STREET ADDRESS

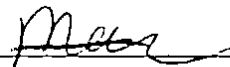
new mailing address, if applicable:

address MAY BE A POST OFFICE BOX

**ending 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:

MAI T. NGUYEN



New Registered Office Address:

8320 BASALISK COURT

Enter Florida street address

NEW PORT RICHEY

Florida 34653

City

Zip Code

Registered Agent's Signature, if changing Registered Agent:

I accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
Florida statutes relative to the proper and complete performance of my duties, and I am familiar with and
understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is
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

☐ Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.

of December 2020


Typed or printed name of signee