120000042911

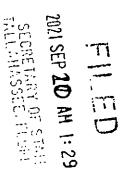
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COVER LETTER . . .

Divi	ision of Cor	porations			
SUBJECT:	NAILS STUDIO BY LD LLC				
SUBJECT	Name of Limited Liability Company				
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		PHAM, MYDUNG			
			Name of Person		
		NAILS STUDIO BY LD	LLC		
			Firm/Company		
		1201 WINTER GARDEN	VINELAND RD SUITE 9		
			Address		
	WINTER GARDEN, FL 34787				
			City/State and Zip Code		
		mydungpham05@yahoo.co			
For further in	iformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report no all:	tification)	
РНАМ, МУ		<u>.</u>	321 240-4398		
			at ()		
	Name o	f Person	Area Code Dayti	me Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$ 25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	Section 5 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	iling Addres		Street Address:		
Registration Section		Registration S			
Division of Corporations P.O. Box 6327				Division of Corporations The Centre of Tallahassee	
	lahassee. I			oe Street. Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

ARTICLES OF ORGANIZATION OF 2021 SEP 17 AM 1: 29

NAILS STUDIO BY LD LLC

SECRETARY OF STATE TALLAHASSEE, FL --

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

The Articles of Organization for this Limited I	.iability Company were filed on	02/05/2020	and assigned
Florida document numberL20000042911	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability company	here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:		
(Principal office address MUST BE A STRE)	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
D. If amonding the project and a most and (a)	manistura I affina addusan an ann		
B. If amending the registered agent and/or agent and/or the new registered office addre		r records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	PHAM, MYDUNG	·····	
New Registered Office Address:	1201 WINTER GARDEN VIN	ELAND RD, SUITE 9	
	Enter F	lorida street address	
	WINTER GARDEN	, Florida	34787
	City		Zıp Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	oer and complete performance istered agent as provided for it registered office address. I het change.	of my duties, and I al	n familiar with and

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	TRINH, KIEU LINH	1201 WINTER GARDEN VINELAND RD, STE 9	🗆 Add
		WINTER GARDEN, FL 34787	=Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Add
			□Remove
			□ (Channa

Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:	_	
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Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing:	_	
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. 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 ord is filed. Dated SEPTEMBER 15 2021 Signature of a member or authorized representative of a member		
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. 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 ord is filed. Dated SEPTEMBER 15 2021 Signature of a member or authorized representative of a member.	_	
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Dated SEPTEMBER 15 2021 Signature of a member or authorized representative of a member	Note:	ctive 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member		SEPTEMBER 15 2021
	Dated_	$\star = \pm (1/v_{\parallel})$
PHAM, MYDUNG		Signature of a member or authorized representative of a member
		PHAM, MYDUNG

Filing Fee: \$25.00