

L20000289405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

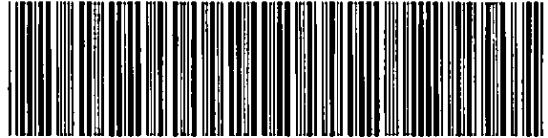
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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S TALLENT

DEC 15 2020

2020 DEC 15 PM 5:06

*Handwritten signature*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 1, 2020

ANH NGO VUU  
3880 20TH AVE NO  
ST. PETERSBURG, FL 33713

SUBJECT: VO NAILS ANN CUC LLC  
Ref. Number: L20000289405

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):

PLEASE COMPLETE THE ARTICLES OF AMENDMENT FOR CLARIFICATION OF CHANGES BEING MADE AND RESUBMIT.

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 820A00023924

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VO Nails Ann Cuc 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:

Ann Vuu  
Name of Person

VO Nails Ann Cuc LLC  
Firm/Company

1137 Missouri Ave N  
Address

Largo FL 33770  
City/State and Zip Code

VO Nails Anh @ Gmail . com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ann Vuu at ( ) 727 515 7021  
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)

Sent  
in previous  
app

**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**

VO NAILS ANN CUC LLC  
(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 Liability Company were filed on 9-15-2020 and assigned Florida document number L 20000289405.

This amendment is submitted to amend the following:

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

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:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**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:

ANH NGO VUU

New Registered Office Address:

1137 MISSOURI AVE N

*Enter Florida street address*

LARGO

*City*

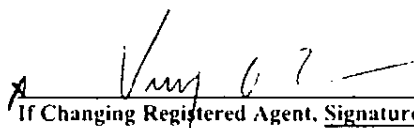
Florida

33770

*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.*



**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          | Cuc tu      | 7930 63rd Ave north     | <input type="checkbox"/> Add                      |
|              |             | pinellas park, fl 33781 | <input checked="" type="checkbox"/> Remove        |
|              |             |                         | <input type="checkbox"/> Change                   |
| MGR          | Anh Ngo Vu  | 3880 20th Ave N         | <input checked="" type="checkbox"/> Add           |
|              |             | St Petersburg Fl 33713  | <input type="checkbox"/> Remove                   |
|              |             |                         | <input checked="" type="checkbox"/> Change To mgr |
|              |             |                         | <input type="checkbox"/> Add                      |
|              |             |                         | <input type="checkbox"/> Remove                   |
|              |             |                         | <input type="checkbox"/> Change                   |
|              |             |                         | <input type="checkbox"/> Add                      |
|              |             |                         | <input type="checkbox"/> Remove                   |
|              |             |                         | <input type="checkbox"/> Change                   |
|              |             |                         | <input type="checkbox"/> Add                      |
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|              |             |                         | <input type="checkbox"/> Remove                   |
|              |             |                         | <input type="checkbox"/> 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.

(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)

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 12-8-2020, \_\_\_\_\_

Signature \_\_\_\_\_

Signature of a member or authorized representative of a member

Ann Nao Vuu

Typed or printed name of signee