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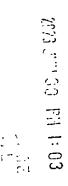
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## **COVER LETTER**

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	LLC		
CI:	Name of Lin	nited Liability Company	
losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
eturn all correspo	ondence concerning this matter	to the following:	
	TINA DO		
		Name of Person	
	NAIL PUB LLC		
	<del>- 12</del>	Firm Company	
	233 TITH STREET STE	102	
	······································	Address	
	MIAMI BEACH FL 3313	9)	
	TINADO615@GMAH_CC	City/State and Zip Code	
	<del>-</del>		tification)
her information c	oncerning this matter, please c	all:	ن ن
ю		615- 290-1188	-
Name o	f Person	Area Code Daytir	ne Telephone Number
d is a check for th	ie following amount:		
.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	∑ \$60,00 Filing Fee.     Certificate of Status & Certified Copy (additional copy is enclosed)
Registration S Division of C P.O. Box 632	Section orporations 7		rporations Tallahassee oc Street, Suite 810
	her information c  OO  Name of the second of	Name of Lin closed Articles of Amendment and feets) are subseturn all correspondence concerning this matter  TINA DO  NAIL PUB LLC  233 HTH STREET STE  MIAMI BEACH FL 3313  TINADO615@GMAIL.CC  E-mail address: of the information concerning this matter, please of DO  Name of Person  d is a check for the following amount:  5.00 Filing Fee   \$\sum_{\text{S30.00}} \text{Filing Fee & }	Address  Mame of Limited Liability Company  Plosed Articles of Amendment and feets) are submitted for filing.  TINA DO  Name of Person  NAIL PUB LLC  Firm Company  233-11TH STREET STE 102  Address  MIAMI BEACH FL 33139  City State and Zip Code  TINADO615@GMAIL.COM  E-mail address: to be used for future annual report no her information concerning this matter, please cult:  DO  Name of Person  Name of Person  Name of Person  TINADO615@GMAIL.COM  E-mail address: to be used for future annual report no her information concerning this matter, please cult:  DO  Street Address:  Registration Section  Division of Corporations  P.O. Box 6327  The Centre of The C

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NAIL PUBLEC		
(Name of the Limite	d Liability Company as it now appears on or A Fiorida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Lia	ibility Company were filed on $\frac{12 \cdot 10/207}{1}$	and assigned
lorida document number 1.20000386975	<del></del> '	
This amendment is submitted to amend the follo	wing:	
a. If amending name, <u>enter the new name of</u>	the limited liability company here:	
he new name must be distinguishable and contain the wo	and the second s	5-5
he new name must be distinguishable and contain the wi	orus Etimited Liatottily Company, the designat	on the or the aboreviation galact.
Enter new principal offices address, if applica	.ble:	; (·)
<u> Principal office address MUST BE A STREE (</u>	TADDRESS)	
		<u> </u>
Enter new mailing address, if applicable:		$-\frac{\omega}{\omega}$
<u>Mailing address MAY BE A POST OFFICE E</u>	<u></u>	
<ol> <li>If amending the registered agent and/or regent and/or the new registered office address</li> </ol>		s, enter the name of the new regis
Name of New Registered Agent:	TINA DO TIMUDO	
New Registered Office Address:		
	Enter Florida stre	et address
		, Florida
	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.

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>	Address	Type of Action
MGR	BINH DO	233 11TH STREET STE 102	□ Add
		MIAMI BEACH FL 33139	≣Remove
			☐ Change
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this blocument's effective date on the I	lock does not meet the app	licable statutory filing requ	(optional) an 90 days after filing.) F aircments, this date w	Pursuant to 605,0207 fill not be listed as
record specifies a delayed effection of the filed.	ve date, but not an effective	time, at 12:01 a.m. on the	earlier of: (b) The	90th day after the
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Dated		<u> </u>		. <del></del>
Dated		ithorized representative of a n	iember	

Filing Fee: \$25.00