

L21000484191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

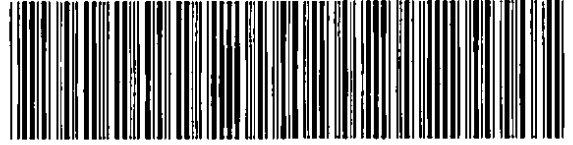
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/01/23--01015--012 **25.00

FILED
2023 MAY -1 AM 9:04
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: NOIRE NAILS & SPA AT SOUTH TAMPA L.L.C.
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:

CINDY T NGUYEN

Name of Person

NOIRE NAILS & SPA AT SOUTH TAMPA L.L.C.

Firm/Company

4033 S Dale Mabry Hwy

Address

Tampa, FL 33604

City/State and Zip Code

noirenailsspa@gmail.com

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

For further information concerning this matter, please call:

Cindy T. Nguyen

813

533-6517

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

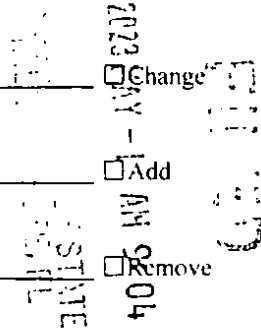
2003 MAY -1 AM 9:04
STATE
SECRET

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> |
|--------------|-----------------------|--|---|
| AMBR | BRYAN KIEN NAM TRUONG | 304 E. Bougainvillea Ave Tampa, FL 33612 | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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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.

04/26/2023

Cindy T. Nguyen

Typed or printed name of signee

2023-24Y-1 A11 9:04

10

Filing Fee: \$25.00