NA 1000497606

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
(,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

not



800390681788

07,11/22--01027--002 **25.00



COVER LETTER

Registration Section

TO:

Division of Cor		,	
SUBJECT: KT NAILS	& SPA BY HN LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	HUNG B NGUYEN		
	·	Name of Person	
	KT NAILS & SPA BY HI	N LLC	5u2.
		Firm/Company	
	4258 53RD AVENUE E		T THE STATE OF THE
		Address	
	BRADENTON, FL 34203		7:5
		City/State and Zip Code	
	HNNAILSALONNO.1@G		
	E-mail address: (to be used for future annual report notif	fication)
For further information c	oncerning this matter, please c	all:	
DENISE VU		813 732 - 6446 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations
Tallahassee,		2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lin	nited Liability Company as (A Florida Limited Liabili	it now appears on our records (ty Company)	<u>s.</u>)	-
The Articles of Organization for this Limited Florida document number 1.21000497606	Liability Company were	: filed on 11/19/2021	and a	assigned
This amendment is submitted to amend the fo	llowing:			
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 Co	ompany," the designation "LLC"	or the abbreviation	"L.L.C."
Enter new principal offices address, if appl	icable:	· · · · · · · · · · · · · · · · · · ·		
Principal office address MUST BE A STRE	ET ADDRESS)	 -		
			- C3	
			· (=	" []
inter new mailing address, if applicable:			<u>: </u>	
Mailing address MAY BE A POST OFFICE BO	E BOX)		1,17%	
			: 52	
 If amending the registered agent and/or gent and/or the new registered office addr 		ess on our records, <u>enter t</u>	the name of the n	iew registe
Name of New Registered Agent:	DENISE VU			
New Registered Office Address:	3404 CRENSHAW I	LAKE ROAD		
		Enter Florida street address	• ·	
	LUTZ	, Flo	rida <u>33548</u>	
		City	Zip Coa	le

New Registered Agent's Signature, if changing Registered Agent:

KT NAILS & SPA BY HN LLC

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
AMBR	ТОММҮ ТА	6234 45TH LN E	∃ Add
		BRADENTON, FL 34203	□Remove
			□Change
AMBR	HUNG B NGUYEN	4258 53RD AVE EAST	□ Add
		BRADENTON, FL 34203	□Remove
			; ☐Change
		 	(= 1)
			□Remove □ □ □ □ □Change
<u> </u>			□Add
			□Remove
		 	Change
			□ Add
		 	□Remove
			□Change
			□ Add
			□Remove
			□ Change

			 	-
	· · · · · · · · · · · · · · · · · · ·		 	
	<u>.</u>			
			- 1	2022
			<i>(:</i> *	1
			13	797
				-:-
	<u> </u>			- 10 -
ective date, if other than the	date of filing:		(optional)	
effective date is listed, the date mu	st be specific and cannot be prior to d lock does not meet the applicable	ate of filing or more than 90 da	ays after filing.) Pursua	nt to 605.020
rument's effective date on the E	Department of State's records.	success summer support		
and anneiting a delayed affecti	ve date, but not an effective time.	at 12:01 a.m. on the earlie	er of: (b) The 90th i	day after th
s filed.	o date, out not an effective time.	ar raise difficulting odding		-,
, MAY IST	2022			
ed	11			

Typed or printed name of signee