422000086416

(Rec	questor's Name)	
(Add	lress)	
(Add	lress)	
•	•	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	filing Officer:	

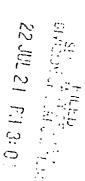
Office Use Only



100391334251

S. CHATHAM OCT 1 2 2022

07/21/23--01011--018 ++30.01



COVER LETTER

TO:

TO: Registration Section Division of Corporations
SUBJECT: Opus Nails & Spa LLC Name of Limited Liability Company
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:
Le T Nguyen
Name of Person
Opus Nails & Spa LLC Firm/Company
Firm/Company
4133 N Federal Huy
Address
has later A 22431
Boca Faton, FL 33431 City/State and Zip Code
E-mail address (to be used for future annual report hotification)
For further information concerning this matter, please call:
Le T Nguyen at (661) 932 - 4949 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee
(additional copy is enclosed) Certified Copy
(additional copy is enclosed)
Mailing Address: Street Address:
Registration Section Registration Section
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability	Spa IIC Company as it now appear Jimited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Co	inpany were filed on	02/23/2027	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limit</u>	ed liability company he	<u>ere</u> :	
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the de	esignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRI	<u></u>		<u>N 9</u>
	 		61 68 62 68 72 68
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			- 10
			٠٠٠٠ ر
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our ro	ecords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Flor	ida street address	
		, Florida	
	Сйу		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 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	Kira P. Vu	1420 NE 17th street	🗆 Add
		Fort Lauderdale, FZ 33305	∑ Remove
		·	□Change
AMBR	ttung Q Vu	543 NW 35th Place	(1
		Boca Ration, FZ 33431	Remove
			r (i) Change
MBR	throng T. Nguyen	Boca Ration, FZ 3342	
	·	Boca Ration, FZ 3342	☐ Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove

			•••							
										
									<u>N</u>	-
									<u>r</u> -	<u> </u>
									11 2	왕(년 - 왕(년 -
			—		- 			.,	70	7.
									<u> </u>	
										<u></u>
			_							·
				······································		. <u>.</u>				
										<u> </u>
- <u> </u>										
	.									
Effective date, f an effective date Note: If the dat document's effe	is listed, the date e inserted in th	must be specifi is block does i	c and canno not meet th	ie applicab			ın 90 days af			
record specifie d is filed.	s a delayed effe	ective date, bu	t not an eff	fective time	e, at 12:01	a.m. on the	earlier of:	(b) The	90th da	y after the
	115120	22		022	· •					
Dated <u>O</u>		,								
Dated			7 lung	my	ved represen	_	_	_		