802FF1000177208

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<u>- #1)</u>
(Cir	y/Otate/Zip// none	- 11)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
1		:
L		· · · · · · · · · · · · · · · · · · ·

Office Use Only



300384529723

05/09/22--01019--037 **25.00

SI CHE LARY OF STATEMS BIVISION OF CUMPURATIONS

22 MAY -9 PM 2: 18

T MATTHEWS

COVER LETTER

	ration Section on of Corporations		
LI SUBJECT:	AND GRAND LUCKY NAIL SPA LI	.c	
30b/i/C1.	Name of Lim	ited Liability Company	
The enclosed Ar	rticles of Amendment and fee(s) are sub	mitted for filing.	
Please return all	correspondence concerning this matter	to the following:	
	ANDY B LAI, CPA		
		Name of Person	
	LAI & COMPNY CPA, PI	LLC	
		Firm/Company	
	7850 ULMERTON RD, S	TE 7A	
		Address	
	LARGO, FL 33771		
		City/State and Zip Code	
	ANDYLAI@LAICOCPA.C	COM to be used for future annual report notifi	cation)
For further infor	mation concerning this matter, please ca		canon,
ANDY LAI		727 592-0678	
	Name of Person	at () Area Code Daytime	Telephone Number
Enclosed is a che	eck for the following amount:		
■ \$25.00 Filin	rg 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)
	<u>z Address:</u> tration Section	Street Address: Registration Sec	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 FOR EARY OF STATE OF DIVISION OF CORPORATION:

LI AND GRAND LUCKY NAIL SPAILLC

22 MAY -9 PM 2: 18

(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 Comp Florida document number <u>L22000177208</u>	pany were filed on	04/08/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company	<u>/ here</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company," tl	he designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u>s)</u>		· · · · · · · · · · · · · · · · · · ·
		<u></u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on ou	r records, enter the name	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter F	Florida street address	
	City	, Florida	
New Registered Agent's Signature, if changing Registered Ag			Zip Code
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent heing filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in the dete performance as provided for in	of my duties, and I am fon In Chapter 605, F.S. Or, 1	amiliar with and if this document is

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>	Type of Action
AMBR	LIN WANG	22299 STATE ROAD 54, SUITE 108. LUTZ, FL 33549	≣ Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
			□Add
		4	□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change

					<u> </u>
 					
 	 -				
					
•					
				<u> </u>	
					
				-	-
				<u> </u>	
					
			<u> </u>		
					· · · · · · · · · · · · · · · · · · ·
				· · · · · · · · · · · · · · · · · · ·	<u> </u>
					 -
				<u></u>	
Effective date, if other if an effective date is listed, the Note: If the date inserted document's effective date	in this block does not	meet the applican	date of filing or more ble statutory filing re	(option than 90 days after fil equirements, this d	al) ing.) Pursuant to 605.0207 ate will not be listed as
e record specifies a delayerd is filed.	d effective date, but no	t an effective tim	e, at 12:01 a.m. on t	the earlier of: (b)	The 90th day after the
		2022			
Dated MAY 2					
Dated MAY 2			÷ *		
Dated MAY 2	Simer	y L	··		
Dated MAY 2	Signature of	member or authori	zed representative of a	a member	

Filing Fee: \$25.00