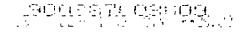
## 122000185481

(Requ	uestor's Name)	
(Addi	ress)	
(Addi	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doci	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer;	
		;

Office Use Only



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2022 MAY I 3 PH 12: 35 SECNE YARY OF STATE

## **COVER LETTER**

	Registration Se Division of Cor			
		MATTHEW LLC		
SUBJEC	.T:	Name of Lim	ited Liability Company	
Th	d A →!-1#	A d d d d	united for file.	
		Amendment and fee(s) are sub ondence concerning this matter		
r icase re	turi an correspe	macrice concerning this matter	to the following.	
		Tung D Nguyen		
			Name of Person	
		NAIL BY MATTHEW LL	C	
			Firm/Company	
		1 N Ocean blvd suite 15		
			Address	
		Pompano beach FL 33062		
			City/State and Zip Code	
		Thenailshoppe15@gmail.co		
		E-mail address: (	to be used for future annual report notifica	ition)
For furth	er information c	oncerning this matter, please c	all:	
Tung D	Nguyen		407 4911439 at ( )	
	Name o	f Person		elephone Number
Enclosed	l is a check for the	he following amount:		
<b>■</b> \$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 Addres Registration:		Street Address: Registration Section	on
	Division of C		Division of Corpo	
	P.O. Box 632	27	The Centre of Tall	lahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810		Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

NAIL BY MA	TTHEW LLC	2	022 MAY 13	PH 12: 35
(Name of the Limited (A	TriffeW L.L.C  Liability Company as it no Florida Limited Liability Co	w appears on our recommony)	BURETARY TALLAHAS	OF STATE SEE, FL
The Articles of Organization for this Limited Liab	ility Company were file	d on May 09th 2022		and assigned
Florida document number L22000185481				
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liability com	pany here:		
NAIL BY MATTHEW LLC				
The new name must be distinguishable and contain the word	s "Limited Liability Compa	ny," the designation "LLC	C" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicab	le: 1 N Oc	ean boulevard suite 15	Pompano Bea	ch FL 33062
(Principal office address MUST BE A STREET)	ADDRESS)			
Enter new mailing address, if applicable:	1 N Oc	ean boulevard suite 15	Pompano Bea	ch FL 33062
	<u></u>			
Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or regingent and/or the new registered office address b	stered office address o ere:	on our records, <u>enter</u>	the name of	the new regis
Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or regingent and/or the new registered office address b	stered office address (	on our records, <u>enter</u>	the name of	the new regis
Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or registered and/or the new registered office address to the Name of New Registered Agent:	stered office address of tere: Tung D Nguyen I N Ocean boulevard sui	te 15		the new regis
Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or registered and/or the new registered office address to a Name of New Registered Agent:  New Registered Office Address:	stered office address of tere: Tung D Nguyen I N Ocean boulevard sui	te 15 Enter Florida street addre		the new regis

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	Tung D Nguyen	1 north Ocean boulevard suite 15 pompano Beach FL	<b>=</b> Add
		33062	□Remove
			□Change
MGR	Tung D Nguyen	2550 Sw 18th tet #1508 Fort Lauderdale FL	<b>=</b> Add
		33315	□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

Effective date, if other than the date of filing:  An effective date, if other than the date of filing:  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 (  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a locument's effective date on the Department of State's records.  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 dis filed.  May 9th 2022  Signature of a member or authorized representative of a member  Tung Dig Nguyen		······································
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