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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AB NAILS I	NC.		
DOCUMENT NUMB	ER: P0300009377	4		
	of Amendment and fee are sul			
Please return all corres	pondence concerning this mat	ter to the following:		
	WESLEY VAN N	GUYEN		
		Name of Contact Person		
	AB NAILS INC.			
•		Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	300-302 SOLANA	RD SUITE C		
•		Address		
	PONTE VEDRA	BEACH FL 3208	2	
•		City/ State and Zip Code		
ПО	PTHU512@YAHO			
<u> </u>		ed for future annual report	notification)	
	E-man address. (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:	•	
WESLEY VA	N NGUYEN	at (817	939-4440	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	rtment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mai</u>	ling Address	Street	<u>Address</u>	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		
,		Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

AB NAILS INC.				
(Name of Corporation as	currently filed with the Flo	rida Dept. of Sta	<u>te</u>)	
P03000093774				
(Documer	t Number of Corporation (if	known)	-	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corp	poration adopts the following	g amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and conti "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal B. Enter new principal office address, (Principal office address MUST BE A S	ation "Corp," "Inc," or "C tion," or the abbreviation "P if applicable:	o". A profession	" "incorporated" or the ab al corporation name must c	contain the
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of	<u>cable:</u> OFFICE BOX)	SUITE C	SOLANA RD	FILESO 24 AMID: 35
D. If amending the registered agent an new registered agent and/or the new	d/or registered office addre v registered office address:	ss in Florida, ent	er the name of the	
Name of New Registered Agent	WESLEY VAN N	GUYEN		
	300-302 SOLAN	A RD STE	С	
-	(Florida stree	t address)	··············	
New Registered Office Address:	PONTE VEDRA	BCH	_, Florida_32082	
	(City)		(Zip Code)	
New Registered Agent's Signature, if ch	hanging Pegistered Agents			
I hereby accept the appointment as regist	ered agent. I am famillar wi	th and accept the	obligations of the position.	
Sic	anature of New Registered Ac	ent if changing	.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	NGUYEN, LUONG V	
Add X Remove			
2) Change	S	NGUYEN, HOA THI	
X Remove			
3) Change	<u>P</u>	NGUYEN, WESLEY	3843 PENBROOK ST
X Add Remove			STE 54 ODESSA TX 79762
4) Change			
Remove			
5) Change		<u></u>	
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	-
	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument is not contained in the amendment tisen.
•	

The date of each amendment(s) a	adoption: U8-22-12
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file daie)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were adaction was not required.	lopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adaction was not required.	dopted by the incorporators without shareholder action and shareholder
Dated_08-22 Signature	-12 // // /
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	WESLEY VAN NGUYEN
	(Typed or printed name of person signing)
	PRESIDENT & SHAREHOLDER
	(Title of person signing)