P0400003246

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COVER LETTER

Division of Corporations
SUBJECT: GNV GRAND NAILS CO. (Name of corporation)
DOCUMENT NUMBER: P04000003246
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Phuong Nguyen (Name of contact person)
(Name of contact person)
GNV GRAND NAILS CO. (Firm/Company)
7261 NW 4th Blvd., Suite 9 (Address)
Gainesville, FL 32607 (City/state and zip code)
For further information concerning this matter, please call:
F. Parker Lawrence at (352)373-4160 (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Mailing Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provis statement of change is	submitted f	or a corporation	organized u	nder the law:	s of the State (of Floria		
in order to c	hange its reg	istered office or	registered ag	zent, or both,	in the State o	of Florida.		
1. The name of the co	rporation:	GNV GRAND I	NV GRAND NAILS CO.					
2. The principal office	address:	7261 NW 4th	Blvd.,	Suite 9,	Gainesvi	lle, FL	32607	
3. The mailing addres	s (if differen	t):						
4. Date of incorporation	on/qualificat	ion: _12/24/03	31	Document nu	mber: <u></u>	0000324	5	
5. The name and stree Florida Department		he current regist	ered agent a	nd registered	office on file	with the		
	Tam Nguye	∍n					e	
	7261 NW 4	4th Blvd., S	Suite 9				TECH E	
	,	lle, FL 3260			· · · · · · · · · · · · · · · · · · ·	<u>.</u>	THE PARTY	
6. The name and stree (if changed):	t address of	he new registere	d agent (if cl	nanged) and	or registered	office	SEE, FLOW	
	Phuong No	Juyen				<u>_</u>	ALCE	
	7261 NW 4	th Blvd., S (P.O. Box NOT acc				<u>_</u>		
	Gainesvil	lle, FL 3260)7	<u>.</u>	<u>.</u> _			
The street address of as changed will be id	its registere entical.	d office and the	street addre	ss of the bus	iness office o	of its registe	ered agent,	
Such change was aut authorized by the boa	norized by r ard, or the co	esolution duly acorporation has be	dopted by it een notified	s board of di in writing o	rectors or by the change.	an officer	so	
Signature of ar	1777 officer or direct	Cor)	<u> </u>	HUONG	NGUYE ed or typed name	N VICE	PRESIDENT	
I kereby accept the a I further agree to con of my duties, and I an document is being fil corporation has been	iply with the n familiar w ed merely to	e provisions of a ith and accept the reflect a change	II statutes re he obligation e in the regi.	elative to the n of mv posii	proper and c	complete p ered agent. ereby confi	erformance Or, if this rm that the	
- luga	me			ugust 11				
(Signature If signing on behalf of	of Registered Ag	;cnt)			(Datc)			
(Typed o	Printed Name)							

* * * FILING FEE: \$35.00 * * *