

P 10000102992

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AUG 08 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: KIMBERLY NAILS AND SPA, INC

DOCUMENT NUMBER: P10000102992

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PETER NGO

Name of Contact Person

KIMBERLY NAILS AND SPA, INC

Firm/ Company

6639 S. DIXIE HWY

Address

MIAMI, FL 33143

City/ State and Zip Code

Peterhavanngo@yahoo.com

E-mail address: (to be used for future annual report notification) ✓

For further information concerning this matter, please call:

PETER NGO

305

878-2553

Name of Contact Person

at (

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Page 1 of 4

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>T</u>	<u>WAYNE TRAN</u>	<u>8379 NW 40TH ST</u>
<input checked="" type="checkbox"/> Add			<u>COOPER CITY</u>
<input type="checkbox"/> Remove			<u>FL, 33024</u>
2) <input type="checkbox"/> Change	<u>S</u>	<u>NHUPHUONG TRAN</u>	<u>8379 NW 40TH ST</u>
<input checked="" type="checkbox"/> Add			<u>COOPER CITY</u>
<input type="checkbox"/> Remove			<u>FL, 33024</u>
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add		NEW OWNERSHIP STRUCTURE OF PETER NGO	
<input type="checkbox"/> Remove		BE 25%. LYNN T NGO 25%. WAYNE TRAN 25%.	
		NHUPHUONG TRAN 25% OWNERSHIP	
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

NONE

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

NONE

The date of each amendment(s) adoption: 08/01/2018 if other than the date this document was signed.

Effective date if applicable: 08/01/2018
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 08/01/2018

Signature Peter Ngo

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

PETER NGO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)