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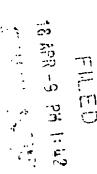




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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: The Nails Shop & Spa Inc

DOCUMENT NUMBER: P11000001979

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:

## Thi Quynh Giao Nguyen Name of Contact Person

Firm/Company

3818 Wayfarer Way

Address

Palmetto, FL 34221

City/State and Zip Code

giaonailspa@gmail.com

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

For further information concerning this matter, please call:

Thi Quynh Giao Nguyen

941 , *i* 

704-2474

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

Street Address:

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

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLorida are to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: The Nails Shop & Spa Inc
2. The principal	office address: 3424 US HWY 301 FL 34222
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 12/14/2017 Olivi Zon Document number: P11000001979
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	Nguyen, Thang
	4526 Halls Mill Xing
	Ellenton, FL 34222
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office 📜 💡
	Thi Quynh Giao Nguyen
	3818 Wayfarer Way
	Palmetto, FL 34221
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
	is authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signal	HANG NGUYEN Printed or typed name and title
I hereby accept I further agree t performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
- Start	nature pilRegistered Agent O4/2/2018
	half of an entity:
Ту	oped or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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