P14000018393

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SECRETARY OF SOLIS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ГІОN:	LA-1 NAILS S	PA INC			
DOCUMENT NUMBER		P14000018	3393			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspon	ndence concerning this ma	tter to the following:				
		THAO TRAN LIN	IH LE			
		Name of Contact Person	n			
		LA-1 NAILS SP	A INC			
	11328 OKE	Firm/ Company ECHOBEE BLV	'D SUITE 10			
	11020 OKL	Address	D., OOTTE 10			
	ROYA	L PALM BEACH	H, FL 33411			
		City/ State and Zip Code	e			
		nungdoinc@gma				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information co	oncerning this matter, pleas	se call:		TALI	5	
THAO T	RAN LINH LE	_{at (} 561	309-6861	CHE	¥U	71
Name of C	Contact Person	Area Co	de & Daytime Telephone Nur	nber	22	Late column 1.0
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	artment of State;	77	7	
■ \$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)		4: 24	المسيدة المسادة
Amendr Divisior P.O. Bo	x Address ment Section n of Corporations x 6327 ssee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301			

Articles of Amendment Articles of Incorporation

LA-1 NAILS SPA INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000018393

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the	e corporation:		
		The	new
	word "corporation," "company," or "incorporated" or Corp," "Inc," or "Co". A professional corporation name the abbreviation "P.A."		
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)			
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<i>BOX</i>)		
		Es:	
D. If amending the registered agent and/or reg new registered agent and/or the new register	istered office address in Florida, enter the name of the red office address:	MATARY ANASSES	
Name of New Registered Agent			
			သ
	(Florida street address)	⊃' *	•
New Registered Office Address:	, Florida		
	(City) (Zip Co	de)	
	Registered Agent:		

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 <math>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	<u>Addres</u> s
1) Change	Р	JIMMY LEE	9745 HERONS NEST CT.
Add			APT 106
Remove			LAKE WORTH, FL 33467
2) Change	<u>P</u>	TRUNG THANH NGUYEN	11328 OKEECHOBEE BLY
Add			STE 10. ROYAL PALM
Remove			BEACH, FL 33411
3) Change		-	
Add			
Remove			
4) Change	***		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment provides for an excha	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	iditent if not contained in the amendment itsen.
. <u></u>	
-	·

(no more than 90 days after amendment file date)

_____, if other than the

The date of each amendment(s) adoption:

date this document was signed.

Effective date if applicable:

Adoption of Amendment(s)

action was not required.

action was not required.

Signature