## P14000048245

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

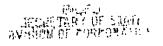
P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: POSH NAILS OF HOMESTEAD INC DOCUMENT NUMBER: P1400048245				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
TINA WANG				
Name of Contact Person				
POSH NAILS				
Firm/ Company				
30336 OLD DIXJE HWY				
HUMESTEAD, FL 33033  City/ State and Zip Code				
JENNIFER — WANGG & YAHW . WM  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
TINA WAN A at (727) 859-2707				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status  (Additional copy is enclosed)  Certificate of Status  Certified Copy  (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations				

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



of TCAN

POSH NAILS OF HOMESTEAD

2016 OCT 28 PM 2: 08

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

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

its Articles of Incorporation:	,		
A. If amending name, enter the new nam	e of the corporation:		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	ion "Corp," "Inc," or "Co".		ated" or the abbreviation
B. Enter new principal office address, if a (Principal office address MUST BE A STR		N/H-	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		V/A	
D. If amending the registered agent and/onew registered agent and/or the new r		Florida, enter the name	e of the
Name of New Registered Agent	JENNIFER	2 WANG	
_	30336 ULD DI (Florida street add	XIE HWY	
New Registered Office Address:	HOME STEA!	<u> </u>	Florida 33033 (Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as registered		nd accept the obligations	of the position.
	- Pall	)-P/	

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) K Change	P	TINA WANG	30336 OLD DINE HWY
Add			HOMESTEAD, FL
Remove			<u>23033</u>
2) Change	P	JENNIFER NANG	30336 OLD DIXE HWY HUMESTEAD, FL
Remove			33 633
3 ) Change		JUSEPH NANG	12077 GANDY BLVD ST. PETERS BURG FL
Add Remove			3370Z
4) Change Add	T	GENIE PHUNG HUYNH - NGUYEN	12077 GANDY BLUD ST. PETERS BURG, FL 33707
Remove  5) Change  Add	2	TINA WANG	30336 OLD DIXIE HWY HOMESTEAD, FL
Remove			33033
6) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N <del>/ 1) -</del>	_
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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)	
1	
N/A	
	_
	_
	_

The date of each amendment(s) add	option:		_, if other than the
date this document was signed.		ምር ነው። አርተራዊ የአጽሃ መደረገ የተመረሰው መጀመሪያ	OF Build OF Build IRROWALL
Effective date <u>if applicable</u> :			
	(no more than 90 days after am	nendment file date) 2016 OCT 28	PM 2: 08
Note: If the date inserted in this blocoument's effective date on the Dep	ock does not meet the applicable statutory artment of State's records.	filing requirements, this date will r	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of vot ficient for approval.	tes cast for the amendment(s)	
	oved by the shareholders through voting gro each voting group entitled to vote separately		
"The number of votes cast for	or the amendment(s) was/were sufficient for	approval	
by		,,,	
-,	(voting group)		
action was not required.	oted by the board of directors without sharehoted by the incorporators without shareholde		
Dated Octo	eer 20th ,2016		
(By a din selected	rector, president or other officer — if director, by an incorporator — if in the hands of a rect of fiduciary by that fiduciary)		_
	TINA WANG		
-	(Typed or printed name of person	ı signing)	<del></del>
_	President (P		
	(Title of person signing	ng)	