

P140000 63151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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8/30/16

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LS NAILS & SPA CORPORATION
Name of Corporation

DOCUMENT NUMBER: P 14000063151

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:

MAI THI NGOC NGUYEN

Name of Contact Person

LS NAILS & SPA CORPORATION

Firm/Company

2101 N. Federal Highway, D103

Address

Pompano Beach, FL 33062

City/State and Zip Code

vickynguyen9040@gmail.com

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

For further information concerning this matter, please call:

MAI THI NGOC NGUYEN at 305 457-3064

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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LS NAILS & SPA CORPORATION
2. The principal office address: 2101 N. Federal Highway, D103, Pompano Beach, FL 33062
3. The mailing address (if different): _____
4. Date of incorporation/qualification: July 28, 2014 Document number: P14000063151
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SU M LE

2101 N. Federal Highway, D103

Pompano Beach, FL 33062

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MAI THI NGOC NGUYEN

2101 N. Federal Highway, D103

P.O. Box NOT acceptable

Pompano Beach, FL 33062

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

MAI THI NGOC NGUYEN, President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

7/25/2016

Date

If signing on behalf of an entity:

MAI THI NGOC NGUYEN

Typed or Printed Name

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