P150003250

(Red	questor's Name)	
(Add	dress)	<u> </u>
(A da	dress)	
(Aut	ness;	
(City	//State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne) (
(Doe	cument Number)	<u> </u>
Certified Copies		of Status
Special Instructions to i	fling Officer:	
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SEP 14 2017 S. YOUNG 17 SEP 13 PH 4: 49 SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ASIA NAILS &	spa by Chau inc.	
DOCUMENT NUMBER: P15000032150		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
DIEM MY THI DO		
ASIA NAILS & SPA BY	Name of Contact Person CHAU INC.	
	Firm/ Company	
1850 US Highway 1		
Rockledge, FL 32955	Address	
	City/ State and Zip Code	
chaunguyen41@yahoo.com		
E-mail address: (to be	used for future annual report notification)	
For further information concerning this matter, ple	ease call:	
DIEM MY THI DO	at (321) 633-3111	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	le payable to the Florida Department of State:	
\$35 Filing Fee \$\Bigcup \text{\$43.75 Filing Fee & Certificate of Status}\$		
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	

Articles of Amendment to Articles of Incorporation of

Q. ~

ASIA NAILS & SPA BY CHAU INC. (Name of Corporation as currently filed with the Florida Dept. of State) P15000032150 (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: A. If amending name, enter the new name of the corporation: None The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." None B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: DIEM MY THI DO Name of New Registered Agent 1850 US Highway 1 (Florida street address) Rockledge New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positions

Signature of New Registered Agent, if changing

If amending the Officers	and/or	Directors.	 enter the title and nam	e of each officer/di	rector being removed and title, name, and
address of each Officer a (Attach additional sheets,	and/or D if necess	irector be sary)	ing added:		
Executive Officer; CFO =	President = Chief I	t; T= Trea. Financial (surer; S= Secretary; D= Officer. If an officer/dire	Director: TR= Tru	istee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office
a change, Mike Jones lea	in the fo ves the c	llowing mo orporation	anner. Currently John D 1, Sally Smith is named th	oe is listed as the PS ne V and S. These sh	ST and Mike Jones is listed as the V. There is could be noted as John Doe, PT as a Change,
Mike Jones, V as Remove, Example:	, and Sai	ly Smith, S	Vas an Ada. 		
X Change	<u>PT</u>	John Doo	<u>e</u>		
X Remove	V	Mike Jor			
X Add	<u>sv</u>	Sally Sm	<u>nitb</u> 		
Type of Action (Check One)	Title		Name		Address
1) Change	P	_	CHAU NGUYEN		1850 US Highway 1,
Add					Rockledge, FL 32955
X Remove					
2) Change	P		DIEM MY THI DO		1850 US Highway !,
X Add	_				Rockledge, FL 32955
Remove					
3) Change					
Add					
Remove					
4) Change	_			_ 	
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		<u> </u>			
Add					

__ Remove

. If amending or adding additional Article	 es, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
<u></u>	
F. If an amendment provides for an excha	nge, reclassification, or cancellation of issued shares, direct if not contained in the amendment itself:
(if not applicable, indicate N/A)	dment it not contained in the amendment itsen.
,,	
	1)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (Cl	HECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
☐ The amendment(s) was/were approved by the must be separately provided for each voting	ne shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	 andment(s) was/were sufficient for approval
by	."
(ve	ting group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
09/01/2017 Dated	
selected, by an in-	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court ry by that fiduciary)
CHAU N	 GUYEN
	(Typed or printed name of person signing)
President	
	(Title of person signing)