P17000015488

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ATHENA N	AILS SPA INC	
DOCUMENT NUME	BER: P17000015488	3	
	of Amendment and fee are sub		
	pondence concerning this matt		
		_	
	TU THANH TRAN	·	
	ATHENA NAILS S	Name of Contact Person	
		Firm/ Company	
	10080 OKEECHO	BEE BLVD #30	00
		Address	
	ROYAL PALM BE		
		City/ State and Zip Code	;
trai	n99992003@ya	ihoo.com	
	E-mail address: (to be use	ed for future annual report	notification)
For further information	n concerning this matter, please	e call:	
TU THANH T	RAN	_{at (} 561	635-0097
Name o	of Contact Person	Area Coo	fe & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	ayable to the Florida Depa	rtment of State:
□ \$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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment Articles of Incorporation of

ATHENA NAILS SPA INC

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

ent(s) to

P17000015488				
(Documen	t Number of Corporation (if kr	nown)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flo</i>	orida Profit Co	rporation adopts the follo	wing amendme
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and cont "Corp" "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	". A professio	or "incorporated" or the onal corporation name mi	The new e abbreviation ust contain the
B. Enter new principal office address, (Principal office address MUST BE A ST				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of				
D. If amending the registered agent an		s in Florida, e	nter the name of the	
new registered agent and/or the new Name of New Registered Agent	<u>v registered office address:</u> TU THANH TRAN	l		
Name of New Registered Agent	413 HUORN PL	* ** ** ***		
	(Florida street			
New Registered Office Address:	WEST PALM BEA	ACH	, Florida 33409 (Zip Code)	
	, 5.00			
New Registered Agent's Signature, if collaboration I hereby accept the appointment as registered.	hanging Registered Agent: lered agent. I am familiar with	<u> </u>		9 n .

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 <u>Doe</u>	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	Р	JAMIE HANGA TRUONG	2990 HAMBLINGWAY WELLINGTON FL 33414
2) Change Add X Remove	VP	COLLIN NGUYEN	2990 HAMBLINGWAY WELLINGTON FL 33414
3) Change Add Remove	<u>P</u>	TAM THI TRAN	10080 OKEECHOBEE BLVD #300 ROYAL PALM BEACH FL 33411
4) Change	<u>VP</u>	TU THANH TRAN	10080 OKEECHOBEE BLVD #300 ROYAL PALM BEACH FL 33411
5) Change Add Remove			
6) Change Add Remove			

utach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
and and the second of the seco			
	ALLEGA CHEST CONTROL C		
	At Called		
		A ALEPU	•••
an amendment provides for an exch	ange, reclassification, or can	cellation of issued share	:S.
	1 410 4 4 1 11 41	e amendment itself:	
provisions for implementing the ame	nament it not contained in tr		
orovisions for implementing the ame (if not applicable, indicate N/A)	ndment II not contained in tr		
provisions for implementing the ame	ndment II not contained in tr	•	
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provisions for implementing the ame	ndment II not contained in tr		

The date of each amendment	t(s) adoption: 11/05/2017
Effective date <u>if applicable</u> :	01/01/2018
Effective date <u>if applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
	re adopted by the shareholders. The number of votes cast for the amendment(s) rere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s).
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval
by	(voling group)
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	05/2018
Signature _	- Luci
Si	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
	TAM THI TRAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)