P190000 47903

(Re	equestor's Name)	
(Ac	ddress)	_
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	





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JUL 20 2019 LALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: LOVELY NAILS	ATLANTIC INC			
DOCUMENT NUMBE	ER: P19000047903	· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following;			
C	THINH NGUYEN				
-		Name of Contact Person	1		
S	SAIGON SERVICES				
-		Firm/ Company	 		
5	816 NORMANDY BLVD				
_		Address			
J.	ACKSONVILLE, FL 32205	5			
_		City/ State and Zip Cod	e		
CHINE	I_CN@YAHOO.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
	concerning this matter, pleas				
CHINH NGUYEN	 	at (
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made	payable to the Florida Depa	irtment of State:		
S35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment to Articles of Incorporation of

LOVELY NAILS ATLANTIC INC

	y filed with the Florida Dept. of State)
P19000047903	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this attacks of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Covord "chartered," "professional association," or the abbreviation "i	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	·
Principal office address <u>MUST BE A STREET ADDRESS</u>)	F~-)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Stuting dutiess SIAT BE ATOST OFFICE BOX)	-0
	
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	vet address)
(Florida stre	vet address) Florida

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of held. President, Treasurer, Director would be 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. Ther 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 Char 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>	<u>Name</u>	<u>Addres</u> s			
1) Change	V	AMY PHAN	3226 BRIDGECOVE CIR E			
X Add			JACKSONVILLE, FL 32216			
Remove						
2) Change	V	TUYET N TRAN	4139 AUTREY AVE			
Add			JACKSONVILLE, FL 32210			
X Remove						
3) Change	V	THANH TRINH	4139 AUTREY AVE			
Add			JACKSONVILLE, FL 32210			
X Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach <i>add</i>	ditional sheets	s, if necessary).	(Be specific)				
							
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		· · · · · · · · · · · · · · · · · · ·	 				
	<u> </u>						
						. .	
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fan amer	ndment provi	des for an exch	ange, reclassific	ation, or cancel	lation of issued	shares.	
provision	is for implem	enting the amer	ndment if not co	ntained in the a	<u>mendment itsel</u>	<u>f:</u>	
(ij no	ot applicable, i	naicate N/A)					
					-		
							
					·		- -

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be listed as t
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
07/16/2019 Dated	
Signature Zuyw	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
TUYET N TRAN	
(Typed or printed name of person signing)	
VICE PRESIDENT	
(Title of person signing)	