P20000021768

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1.1.1

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: T & H Naits Inc				
	BER: 1/20000021768				
The enclosed Articles	of Amendment and fee are su	bnutted for filing.			
Please return all corre	spondence concerning this ma	iter to the following:			
	KIM TUYEN NGO .				
	Name of Contact Person T & H NAILS, INC Firm/ Company				
	3767 GULF BREEZE PWKY				
	Address GULF BREEZE, FL 32563				
		City/ State and Zip Cods			
	aastrans@yahoo.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:at (932-8410		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
inclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State;		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, Ft. 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

T & H NAILS, INC		
(Name of Corporation as current)	y filed with the Florida Dept. of	f State)
P20000021768		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopt	is 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," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name	the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
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 add	ress in Florida, enter the name	of the
new registered agent and/or the new registered office address	<u>:</u>	
Name of New Registered Agent		<u> </u>
(Florida str	eet address)	
		1
New Registered Office Address:	, t·) (City)	orida <u>t .</u> (Zip Gode) + m
	(- v)	
		' ਜਾਂ - ਯ
New Registered Agent's Signature, if changing Registered Agent	•	ప
hereby accept the appointment as registered agent. I am familiar v		the position.
		·
Signature of New R	egistered Agent, if changing	
Theck if applicable		

 \square The amendment(s) is are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 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.

X Change	<u>PT</u> <u>John</u>	John Doe				
X Remove	<u>V</u> <u>Mik</u>	Mike Jones				
X Add	<u>SV</u> <u>Sall</u>	Sally Smith				
Type of Action (Check One)	<u>Titte</u>	Name	Address			
1) X Change	AMBR	KIM TUYEN NGO	3767 GULF BREEZE PKWY			
Add			GTUL BREEZE, FL 32563			
Remove 2) X Change	MBR	HIEU V. NGUYEN	3767 GULF BREEZE PKWY			
Add			GULF BREEZE, FL 32563			
Remove 3) Remove						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change	 -					
Add						
Remove						
6) Change		· 	 			
Add			 			
Remove						

The date of each amendate this document was significant.		NOV 15	, 6020	, if other than the
Effective date <u>if applical</u>	~	7γ / Qo (no more than 90 a	20 lays after amendmen	t file date)
Note: If the date inserted document's effective date			de statutory filing re	quirements, this date will not be listed as the
Adoption of Amendment	t(s) (<u>CH</u>	ECK ONE)		
The amendment(s) was action was not required	s/were adopted by the i f.	ncorporators, or boa	ard of directors withe	out shareholder action and shareholder
☐ The amendment(s) was	•		umber of votes east t	or the amendment(s)
☐ The amendment(s) was must be separately pro	swere approved by the oxided for each voting			
"The number of	votes cast for the amen	idment(s) was/were	sufficient for approv	tal
by	(voti	·		
	(voti	ng group)		
Dated_	re Chuon	15,2020		
Signatu				
	(By a director, presidence selected, by an incomposited fiduciary	rporator – it in the h	 if directors or officands of a receiver, tr 	
	ANGIE HA	WKER		
		Typed or printed nat	me of person signing)
	SECRETAR	RY		
		Title of person signi	ng)	