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A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: VELVET NAIL B	JAR OF LAKE MARY INC	• -				
DOCUMENT NUV	P21000020596	 					
The enclosed Article	s of Amendment and fee are st	abmitted for filing.					
Please return all corr	espondence concerning this ma	atter to the following.					
	THAI NGO						
	Name of Contact Person						
	VELVET NAIL BAR OF LAKE MARY INC						
		Firm/ Company					
	901 CURRENCY CIR, STE 1071						
	Address						
	LAKE MARY, FL 32746						
		City/ State and Zip Code	2				
For further information	on concerning this matter, plea		961-3662				
	of Contact Person	at () 961-3662 de & Daytime Telephone Number				
	or the following amount made						
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)				
	iling Address		Address				
	endment Section rsion of Corporations		ment Section π of Corporations				
) Box 6327	The Co	entre of Tallahassee				
Tal	lahassee, FL 32314	2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Cornoration	n as currently filed with the Florida Dept. of State
VELVET NAIL BAR OF LAKE MARY INC	SECRETARY OF STATE
(Docume	ont Number of Corporation (if known ALLAHASSEE, FL
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
name must be distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association." or the abbrevi	The new poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word iation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address	. Florida
	(Cuy) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I c	dered Agent: am familiar with and accept the obligations of the position.
Signati	ure of New Registered Agent, if changing

Check if applicable

☐ 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)

Evample:

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	PT	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	Р	_	THIEN NGO	1985 SUNBOW AVE
Add X D				APOPKA FL 32703
Remove 2) Change	P	<u></u>	THAI NGO	1985 SUNBOW AVE
X Add				APOPKA FL 32703
Remove 3) Change	-,	_		
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		-		
Add				
Remove				

	amending or adding additional Articles, enter change(s) here: tach additional sheets. if necessary). (Be specific)
	· · · · · · · · · · · · · · · · · · ·
Ħ	on amendment provides for an exchange, reclassification, or cancellation of issued shares,
P	rovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate $N[A]$

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	04/01/2021		
The date of each amendment(s date this document was signed) adoption:		, if other than the
-	04/01/2021		
Effective date if applicable:			
	(no more than	90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the		ficable statutory filing requirements, this date wi	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were action was not required	adopted by the incorporators, or	r board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were by the shareholders was/were		he number of votes east for the amendment(s)	
		nrough voting groups. The following statement o vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/w	ere sufficient for approval	
by			
	(voting group)		
04/01/20)21		
Dated			
Signature ×	Chargo		
sele		ficer – if directors or officers have not been the hands of a receiver, trustee, or other court y)	
	THAI NGO		
	(Typed or printed	I name of person signing)	
	PRESIDENT		
	(Title of person s	agning)	