P22000051225

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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2022 NOV 21 PH 5: 45

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PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ST JOHNS NAIL:	SPA INC	
DOCUMENT NUMB	P22000051225		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MICHAEL PHAN		
-		Name of Contact Persor	1
	PHAN & PHAN PA		
•		Firm/ Company	
	6100 GREENLAND RD STE	E 404	
-		Address	
	JACKSONVILLE, FL 32258	3	
•		City/ State and Zip Code	2
	INFO@PHANPA.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
MICHAEL PHAN		at (<u></u>	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to		155
Articles of Incorporation		10 HOV
of		₹ 2
ST JOHNS NAIL SPA INC	ĮÄSSE!	_
(Name of Corporation as currently filed with the Florida Dept. of State)		=======================================
P22000051225	27.0	Ċ
(Document Number of Corporation (if known)	=	<u>ب</u> تن
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ring amend	ment(s) to
A. If amending name, enter the new name of the corporation:		
		iew
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must con "chartered," "professional association," or the abbreviation "P.A."	ition "Corp tain the wo	ord
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 address in Florida, enter the name of the new registered agent and/or the new registered office address:		
new registered agent and/or the new registered office address.		
Name of New Registered Agent		
(Florida street address)		
New Registered Office Address:		
New Registered Office Address:, Florida	ip Code)	_
New Registered Agent's Signature, if changing Registered Agent:		
Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	1.	

Signature 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)

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.

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)	Title	Name	<u>Addres</u> s
1) Change	VP	RYAN NGUYEN	140 LITTLE CYPRESS DR
X Add			SUITE 404
Remove			ST JOHNS, FL 32259
2) Change			
Add			
Remove 3) Change			
Add			
Remove			.
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach add	ng or adding additional ditional sheets, if necessa.	ry). (Be specific)	1		
			<u> </u>		
		-	***		
			<u>-</u>		
<u> </u>					
			<u> </u>	-	-
F. <u>If an amen</u>	ndment provides for an	exchange, reclassi	fication, or cance	llation of issued sh	ares,
<u>provisions</u> (<i>if not</i>	s for implementing the tapplicable, indicate NA	<u>amendment if not</u> 4)	contained in the	amendment itself:	
	-				
			<u> </u>		<u> </u>
					

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 document's effective date on the E	block does not meet the applicable statutory filing requirements, this date we bepartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder action ar	nd shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	7 2
☐ The amendment(s) was/were apmust be separately provided fo	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	2022 NOV 21 PH 5:
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	7.21 VSSE
by		
	(voting group)	- 15 - 5
		E
11/15/202 Dated	<u></u>	_ · · · · · · · · · · ·
Signature	mich	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	MINH C NGUYEN	
	(Typed or printed name of person signing)	<u>-</u>
	PRESIDENT	
	(Title of person signing)	