## P24000053364

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	D Nailspa, Inc 000 533 64			
DOCUMENT NUMBER: Pd4 00	000 533 64			
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
Tien Cao				
	Name of Contact Person			
TO D Naiko	s. Inc			
	Firm/ Company			
1890 9h	St. N.			
	Address			
Nboles, F	L 34102 City/ State and Zip Code			
maiken	21981@ Jahoo.com			
E-mail address: (to be us	sed for future annual report notification)			
	·			
For further information concerning this matter, pleas	se call:	AL OES	2024	
Tien Cas	at (239) 643-6556		2024 SEP 12	
Name of Contact Person	Area Code & Daytime Telephone Number	<u>表</u>	2	t
Enclosed is a check for the following amount made p	at ( 239 ) 643 - 6556  Area Code & Daytime Telephone Number payable to the Florida Department of State:   \$\Begin{array}{cccccccccccccccccccccccccccccccccccc		PH 4: 07	
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)	TATE	: 07	
Mailing Address Amendment Section	Street Address Amendment Section			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

01	

Te D No	alspa, Inc
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P240	1000 53364
	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida 5 its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the cor	rporation:
	The new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable:	1890 9th St. N.
(Principal office address MUST BE A STREET ADDI	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	1890 9th St. N.
	No ples FL 34102 18 1
D. If amending the registered agent and/or registered new registered agent and/or the new registered o	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent:
I hereby accept the appointment as registered agent. I	l am familiar with and accept the obligations of the position.
Signa	ture 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			SECRET
Remove			SEP 12 T
4) Change			AVSVI
Add			<u> </u>
Remove			77 0
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/4)	Attach additional sheets, if necessary). (Be specific)		
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)			
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	provisions for implementing the amendment if not contained in the amendment itself:	2 f	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: Saptember 1, 2024  (no more than 90 days after amendment file date)	
ino more man 70 days after amenament file dates	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required.	d shareholder
☐ 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 cast for the amendment(s) was/were sufficient for approval	
by	
by"  (voting group)	
Signature  (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)   Out Ma  (Typed or printed name of person signing)	SECRETARY SEE, F
President	- FEE 9
(Title of person signing)	