

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000156691

**Entity Name:** THAI NAILS LLC

**Current Principal Place of Business:**

7119 SOUTH TAMIAMI TRAIL  
UNIT I  
SARASOTA, FL 34231

**Current Mailing Address:**

7119 SOUTH TAMIAMI TRAIL  
UNIT I  
SARASOTA, FL 34231 US

**FEI Number:** 46-1626529

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KAUFFMAN, PHAKHAMON  
7119 SOUTH TAMIAMI TRAIL  
UNIT I  
SARASOTA, FL 34231 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name KAUFFMAN, PHAKHAMON  
Address 7119 SOUTH TAMIAMI TRAIL  
UNIT I  
City-State-Zip: SARASOTA FL 34231

Title MGRM  
Name KAUFFMAN, SCOTT  
Address 7119 SOUTH TAMIAMI TRAIL  
UNIT I  
City-State-Zip: SARASOTA FL 34231

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SCOTT KAUFFMAN

MGRM

03/29/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date