L09000114363

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AUG - 6 2013 T. HAMPTON

COVER LETTER

TO:

Registration Section Division of Corporations

IECT.

International Gold Brokers LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher R Roberts

Name of Person

Unique Diamond Boutique LLC

Firm/Company

157 E New England Avenue Suite 202

Address

Winter Park, FL 32789

City/State and Zip Code

croberts@parkavegold.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher E Roberts

407 218-5958

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

■\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

International Gold Brokers LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 12/01/2009	and assigned
Florida document number L09000114363		SECRET DIVISION O
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ility company boro:	FILE FOR CO
Unique Diamond Routique LLC		PH 1
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "LI	C" or the abbreviation
Enter new principal offices address, if applicable:	157 E. New England Ave	
(Principal office address MUST BE A STREET ADDRESS)	Suite 202	
	Winter Park, FL 32789	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	157 E New England Ave Suite 202	
	Winter Park, FL 32789	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		e name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	
	Emer r iorida street addre	:SS
	, Florida	Zip Code
	Oily	Lip Coue

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Title Address Type of Action Name** Remove Remove Remove Remove Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated August 2 2013
/ Custin E Kolant
Signature of a member or authorized representative of a member
Christopher E Roberts
Typed or printed name of signee
Page 3 of 3

Filing Fee: \$25.00