L19000036925

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SUBJECT:	JJ JEWELRY LLC		
SUBJECT:	Name of Lim	ited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	•	
•	<u> </u>	Javier Markowicz	
		Name of Person	,
		Markowicz Law	
	·	Firm/Company	
		2999 NE 191 St	
		Address	
		Suite 702	
	.	City/State and Zip Code Aventura, FL, 33180	
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	all:	
Javier Ma	rkowicz	786 371-1295	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

TO:

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

11 JEMEI	LRY LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears bility Company)	on our records.)	
The Articles of Organization for this Limited Liability Company w	ere filed on	02/05/2019	and assigned
lorida document numberL19000036925			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liability	Company," the des	signation "LLC" or the abb	oreviation "L.L.C."
Enter new principal offices address, if applicable: 3363 NE 163rd Street			
Principal office address MUST BE A STREET ADDRESS)	Suite 508		
	North Miami Beach, FL, 33160		
Enter new mailing address, if applicable:	3363 NE 16	3rd Street	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 508		
	North Miami Beach, FL, 33160		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		our records, enter	FILED HAY 24 PM 6:
		, Florida	2
	City		Zip Code

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
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<u>ote:</u> If the	ate, if other than the dedate is listed, the date must be date inserted in this block effective date on the Dep	k does not meet the app	licable statutory filing i	e than 90 days after requirements, this	nary iling.) Pursuant to 605.020 date will not be listed a
	specifies a delayed of the second		not an effective tin	ne, at 12:01 a	.m. on the earlier o
ated	May 21	2019	·		
		KANN	uthorized representative o		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00