103000045512

(Re	questor's Name)			
(Ād	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer.				
5/3	MAC	liens		
Loz	b-4551	12		

Office Use Only



200034969482

Mult

05/04/04--01049--010 **50.00

04 MAY -3 AT 9: 25

BOOKER & ASSOCIATES, P.A. KIM C. BOOKER, ATTORNEY AT LAW

170 BLOXHAM AVENUE ORANGE CITY, FLORIDA 32763 PHONE (386) 774-6552 FAX (386) 774-1442

April 29, 2004

Division of Corporations Corporate Filings 409 E Gaines St. Tallahassee, FL 32399

Re: Exquisite Jewelry Collections, LLC

To whom it may concern:

Enclosed please find the original signed Articles of Amendment to the Articles of Organization and a Statement of change of Registered Agent for the above referenced Limited Liability Company. Also enclosed please find our check in the amount of \$50.00, representing your filing fee for same.

Thank you for your help and cooperation in this matter.

Sincerely yours,

By:

Booker & Associates, P.A.

Kim C. Booker, Attorney at Law

KCB:ns

Enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	e of 1 rorrain.		
1. The name of the limite	ed liability company is:	Exquisite Jewelry Collecit	ions, LLC
2. The mailing address of	f the limited liability cor	mpany is: 1675 A Provider	nce Blvd.,
Deltona, Florida 32725			
November 18, 2003		L0300004551	2
3. Date of filing/registration in Florida 4. Document n		mber	
5. The name of the register Florida Department of	ered agent and the regist State:	ered office address as shown	on the records of the
•	Lan/Wan Network M	fanagement, Inc.	· .
	1675 A Providence	Name Blvd.	
	Deltona, Florida 327		O4 MAY -
C 771		State and Zip	- ω t
6. The name and address of the new registered agent and/or office:			
	Nitesh Patel		
	1675 A Providence	lame 3lvd.	25
	Florida street address	(P.O. Box NOT acceptable)	·
	Deltona, Florida 327	2 _{FL}	- • • •
	City, St	ate and Zip	• •
confirmed that after the chand the business office of liability company, it is her the members of the limited the operating agreement of the limited that the limited the operating agreement of the limited that th	nange or changes are ma the registered agent will be confirmed that the of d liability company or a f the limited liability co	nder the laws of the State of I ide, the Florida street address I be identical. Or, in the case change(s) was/were authorizes otherwise provided in the armpany.	Florida, it is hereby of the registered office of a Florida limited d by an affirmative vote of ticles of organization or
(Signature of a member or authori	zed representative of a member		
(Printed or typed name of signee)	PATEZ		
I hereby accept the appoing comply with the provision and I am familiar with and Chapter 608, F.S. Only the address, I hereby confirm (Signature of Registered Leent)	ntment as registered ag s of all statutes relative d accept the obligations his document is being fi that the limited liability	ent and agree to act in this ca to the proper and complete p of my position as registered led to merely reflect a change company has been notified in	spacity. I further agree to erformance of my duties, agent as provided for in in the registered office in writing of this change.

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