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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

(City/State and Zip Code)			
Winter Springs, FL 32708			
(Address)		-	
1396 White Oak Drive			
(Firm/Company)			
(Maine of Fersolly			
Mr. Tom Berger			
Please return all correspondence concerning this matter to the following:			
· · · · · · · · · · · · · · · · · · ·			
(Name of Limited Liability Company)			
CT: DIAMANDIS JEWELERS, LLC			
	(Name of Limited Liability Company) losed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Mr. Tom Berger (Name of Person) (Firm/Company) 1396 White Oak Drive (Address)	(Name of Limited Liability Company) losed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Mr. Tom Berger (Name of Person) (Firm/Company) 1396 White Oak Drive (Address)	(Name of Limited Liability Company) losed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Mr. Torn Berger (Name of Person) (Firm/Company) 1396 White Oak Drive (Address)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I: Name

The name of the Limited Liability Company is: Diamandis Jewelers, LLC

ARTICLE II: Address

The mailing address and street address of the principal office of the Limited Liability Company is:

1313 W. Broadway St Oviedo, FL 32765

ARTICLE III: Registered Agent, Registered Office, & Registered Agent's Signature:

Mr. Tom Berger 1396 White Oak Drive Winter Springs, FL 32708

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating 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.

Registered Agent Signature

ARTICLE IV: Management

☑ The limited liability company is to be managed by one or more members.

Signature of a member or an authorized representative of a member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties or perjury that the facts stated herein are true.)

Typed or printed name of signee