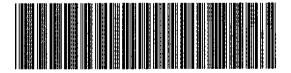
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	(Requestor's Name)				
	(Address)				
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	(City/State/Zip/Phone #)	•			
PICK-UF	P WAIT	MAIL			
	(Business Entity Name)				
,					
	(Document Number)				
Certified Copies	Certificates of \$	Status			
Special Instructions to Filing Officer:					





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B. BOSTICK

JAN 1 2 2012

EXAMINER

COVER LETTER

	Registration Sec Division of Corp						
SUBJECT	r: S	halimar Diamonds,	LLC.				
	· ·	Name of Limi	ted Liability Company				
The enclos	sed Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please retu	ırn all correspon	dence concerning this matter	to the following:				
			Rishi Harjani				
			Name of Person				
		S	Shalimar Jewelers				
			Firm/Company				
		300-D W	estshore Plaza Suite# 91				
			Address				
		7	Гашра Fl 33609				
		61.61	City/State and Zip Code			155	
		-	nalimarfinejewelers.com o be used for future annual report notificati	on)			
For further	information co	ncerning this matter, please ca	•	лі)	io Na Na		- 100 p
	Rishi Ha	nrjani	at (813) 282-1333		79 C (2) (2)	일: 요	° c#
	Name of	Person	Area Code & Daytime Te	lephone Number		0.5	
Enclosed is	s 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)	S60.00 Filir Certificate Certified (additiona	e of Status Copy		d)

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

	Shalimar Diamond,Lle	e				
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now apper orida Limited Liability Company)	ars on our records.)				
The Articles of Organization for this Limited Liab Florida document number	• • •	11/20/2006	and assigned			
This amendment is submitted to amend the follow A. If amending name, enter the new name of the		ere:				
The new name must be distinguishable and end with the "L.L.C."						
Enter new principal offices address, if applicable	le: 300I	300D Westshore Plaza Suite 91				
(Principal office address MUST BE A STREET ADDRESS) Tampa Fl 33609						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>					
B. If amending the registered agent and/or registered agent and/or the new registered office	e address here:		the name of the new			
Name of New Registered Agent:	Rishi Harjani					
New Registered Office Address:	300-d Westshore Plaza Suite 91 Enter Florida street address					
	Tampa	, Florida	33609			
-	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 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 **Type of Action Title** Name **Address** ☐ Add ☐ Remove □ Add ☐ Remove ☐ Add __ Remove ☐ Add ☐ Remove

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

Dated January 5 2012

Signature of a member or authorized representative of a member

Typed or printed name of signee

Rishi Harjani

Page 2 of 2

Filing Fee: \$25.00