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JUL 2 - 2010

EXAMINER



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COVER LETTER

-	on Section f Corporations
SUBJECT:	Jewelry Management Services LLC Name of Limited Liability Company
	Name of Limited Liability Company
The enclosed Articl	les of Amendment and fee(s) are submitted for filing.
Please return all cor	rrespondence concerning this matter to the following:
	Name of Person
	Name of Person
	Jewelry Management Services LLC Firm/Company
	PO BOX 1328
	Address
	Largo FL 33779
	City/State and Zip Code
	City/State and Zip Code jewelry management @ ychoo.com E-mail address: (to be used for future annual report notification)
For further informa	tion concerning this matter, please call:
WALTER	at (727) Sol 6581 Area Code & Daytime Telephone Number
N	ame of Person Area Code & Daytime Telephone Number
Enclosed is a check	for the following amount:
\$25.00 Filing Fe	cec \$\sum_{\text{\$\subset}}\$30.00 Filing Fee & \$\sum_{\text{\$\subset}}\$55.00 Filing Fee & \$\sum_{\text{\$\subset}}\$60.00 Filing Fee, \$\text{\$\central}\$ Certificate of Status & \$\text{\$\central}\$ 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**



Jewelry Management Services LLC (Name of the Limited Liability Company as it now appears on our records.)

(A Flo	rida Limited Liabi	lity Company)					
The Articles of Organization for this Limited Liabil Florida document number		re filed on	3116/2007	and assigned			
This amendment is submitted to amend the following. A. If amending name, enter the new name of the	-	company here	2:				
The new name must be distinguishable and end with the "L.L.C."	e words "Limited I	Liability Compar	ny," the designation "	LLC" or the abbreviation			
Enter new principal offices address, if applicable:		WALTER JOHNSTON					
(Principal office address MUST BE A STREET A				LUD Suite D			
		SAINT	PETERS BUR	6 FL 33710			
Enter new mailing address, if applicable:	_	JMS LLC					
(Mailing address MAY BE A POST OFFICE BOX)		PO BOX 1328 Largo FL 33779					
	_	4	rgo FL 33	3779			
B. If amending the registered agent and/or registered agent and/or the new registered office		address on o	ur records, <u>enter</u>	the name of the new			
Name of New Registered Agent:	WALTE	R JOH	NSTON				
New Registered Office Address:	3790		BLVD SU	VITE O			
Soint Petersburg, Florida 3371t							
_	Seint MC	ity	, Florida	Zip Code			
New Registered Agent's Signature, if changing Regis		•		•			

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 assending 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

	<u>Name</u>	<u>Address</u>	Type of Action
m	James A STEWART	PO BOX 1050	□ Add ←
		Largo FL 33779	Remove
			Add
			Remove
			Add Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
mend	ing any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	ry.)
	Business is chan	iging from a partnersh	ip UC
	to a sincle o	owner LLC effective	07101110
	10 91 31115K 0	World DOC Cliftering	<u> </u>
			
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	06/26/2010		
	14. 14. 11	Ahnate 1	1 /xtt
	¥ 1 1 2	or authorized representative of a member	JANES A S
	_	L JOHNSTON	JAMES A S
		d or printed name of signee	

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Filing Fee: \$25.00