7000108764

(R	equestor's Name)	
(Å	ddress)	
•		
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(B	usiness Entity Nar	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
•		
		Î
		i

Office Use Only



100121641081

03/31/08--01021--010 **25.00

T. CLINE APR - 1 2008 **EXAMINER**

COVER LETTER

TO: Registration Solution of Con					
SUBJECT: CAPRIS	SHO JEWELERS, LLC (Name of Lim	ited Liability Company)			
•					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MARICEL GONZALE	Z			
		(Name of Person)			
	CAPRISHO JĘWELI				
	·	(Firm/Company)			
	4916 SW 143 Ave.	(111)		76. 28	
		(Address)		2008 MAR 31 SECRETAR) TALLAHASS	-T
	Miami, FL 33175_			E AR	
		(City/State and Zip Code)			TITT
For further information	concerning this matter, please of	eall:		AH II: 19	
MARICEL GONZA	ALEZ	at (305) 298-2218		IDA 10	
(Name	of Person)	(Area Code & Daytime	Telephone Number)	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certified (of Status &	
	LING ADDRESS: tration Section	STREET/COURIEF Registration Section	R ADDRESS:		

P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAPRISHO JEWELERS, LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our records.) ited Liability Company)	
(*********	1	
The Articles of Organization for this Limited Liability Con	npany were filed on <u>10/25/2007</u>	and assigned
Florida document number <u>L07000108764</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	4 2
		2008 TALI
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation	"HE or the abbreviation
		SERY -
B. If amending the registered agent and/or register		the name of the nev
registered agent and/or the new registered office address	ss nere:	II: 19
		Dri O
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida street a	addrass)
	(Linei Piorida sireei d	uui ess)
	(City), Florida (Zip Code)	
	(City)	(Zip Coae)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent an	ad agree to act in this canacity. I further a	gree to comply with
the provisions of all statutes relative to the proper and	complete performance of my duties, and I	l am familiar with and
accept the obligations of my position as registered age	nt as provided for in Chapter 608, F.S. O	r, if this document is

(If Changing Registered Agent, Signature of New Registered Agent)

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 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 **Address Type of Action** <u>Name</u> Title 15249 SW 71 Lane Add MGR_ CONCEPCION BLANCO Miami, FL 33193 Add Remove Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated March 25 ignature of a member or authorized representative of a member

Typed or printed name of signee

MARICEL GONZALEZ

Page 2 of 2

Filing Fee: \$25.00