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S. HAWKES
FEB 1 2010
EXAMINER

COVER LETTER

TO: Registration Sect Division of Corpo	prations
SUBJECT: GLC	Name of Limited Liability Company
The enclosed Articles of A	mendment and fee(s) are submitted for filing.
Please return all correspond	dence concerning this matter to the following:
	ROWALD B. OPPER
	Name of Person GLOBAL JEWELRY PESIGNS, LLC Firm/Company
	BOCA FATON FL 33496 City/State and Zlp Code RONO 214@ AOL. COM
	BOCA PATON, FL 33496
	RONO 214@ AOL. COM
For further information cor	E-mail address: (to be used for future annual report notification) accerning this matter, please call:
Name of F	OPPER at (56) 715 - 1660 Area Code & Daytime Telephone Number
Enclosed is a check for the	following amount:
\$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & 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

GLOBAL (Name of the Limited)	J FWE Liability Compar Florida Limited L	ny as it now appears iability Company)	DESIGN s on our records.)	SLLC
The Articles of Organization for this Limited Lize Florida document number	ability Company	were filed on <u>Al</u>	16 3, 200°	and assigned
This amendment is submitted to amend the follo	29 M			
A. If amending name, enter the new name of	the limited liabi	ility company here	2:	E. FLOR
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Compar	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica (Principal office address MUST BE A STREE)		5125 DR, R	B. LAKE	CATALINA U, FL 3349
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	5125 DR. Be	B. LAKE CA RATON	CATALINA J FL 3349E	
B. If amending the registered agent and/o registered agent and/or the new registered off			ur records, <u>enter tl</u>	ne name of the new
Name of New Registered Agent:				
New Registered Office Address:	CA-TALINA er Florida street addr , Florida	DR		
	BOCA T	SATON	. Florida	33496
	City	, - 101.44	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 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 <u>Title</u> <u>Name</u> **Address** Type of Action 9082 BOCA Gardens MGRM MAX MACHAT □ Add Remove Michael FEDER MGRM ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 1-26-Signature of a member or authorized representative of a member B. OPPER
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00