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DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: IMPERIAL DIAMOND & GEM LLC Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
ROBERT H. SchoEPF Name of Person		
Firm/Company		
1409 NE 22M AVE		
Address OCALA, FL. 34470		
Address OCALA, FL. 34470 City/State and Zip Code RHSCHDEPF @ MSN. COM E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Robert H. Schoepf at (352) 402-9950 Name of Person Area Code & Daytime Telephone Number 352-895-9096		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fee \$\$ Certificate of Status \$55.00 Filing Fee \$\$ Certificate of Status \$\$ Certificate of Status \$\$ Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		

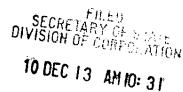
MAILING ADDRESS:

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



TMPERIAL DIAMOND + GEM LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on				
			Florida document number 27000000000000000000000000000000000000	
			This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:			
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	Florido			

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.

City

Zip Code

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 **Title** Name **Address Type of Action** MGRM FACETED INVESTMENTS LIC 2048 SE 88th ST OCALA, FL. 34480 MGRM POBERT H. Schoff 1409 NE 22 ND AVE OCALA, FL. 34470 ☐ Add ☐ Remove Add Remove ∐Add ☐ Remove Add ☐Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) DECEMber 8. Signature of a member or authorized representative of a member LINDA A. BATISTA
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00