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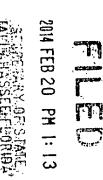
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FEB 2.1 2014 D. BRUCE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AVALON PARK	JEWELERS LLC c 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:	
T. FFR	Name of Person	_
AV	4LON PARK JEWELERS Firm/Company	_
3710_AV	ALON PARK BLVA EAST	_
<u> ORLANE</u>	City/State and Zip Code	2014 FEB 20 SEQUENTARY PACT WHYSS
TIFF E-mail a	FANY BAVLEY @ AOL . COM ddress (to be used for future annual report notification)	in -C
For further information concerning this matter, p	please cali:	PH 1: 13
TIFFAM D BAYLEY Name of Person	at (321) 235-5553 Area Code Daytime Telephone Numb	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fee Certificate of St	tatus Certified Copy Certifie (additional copy is enclosed) Certifie	Filing Fee, cate of Status & cd Copy calcopy 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**

AVALON PARK JEWEL (Name of the Limited Liability Compa- (A Florida Limited L	 /
The Articles of Organization for this Limited Liability Company	were filed on 3 3 2411 and assigned
Florida document number <u>L11000026614</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3710 AVALON PARK BLVD E.
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO FL 32828
Enter new mailing address, if applicable:	3710 AVALON PARK BLVD. E.
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32828
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
10 -	marcer A Phoops
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
Orla	MCity, Florida 328 28 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre	ee 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 605, 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.

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Title Name** <u>Address</u> **Type of Action** TIFFANY D. BAYLEY 3712 AVALON PARK BLVD. E AAdd ORLANDO, FL. 32828 - Remove 871 VILLA DR. STAdd JUSTIN P. DOWLING MGL MELBOURNE, FL 32940 - Remove 811 SW ST. JULIEN CT DAdd JAMES DURANTE JR. MUR PORT ST. LUCIE, FL 34986 Remove □ Add □ Remove

amending any other information, enter change(s) l	here: (Attach additional sheets, if necessary.)
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fective date, if other than the date of filing: e effective date must be specific, cannot be prior to date of receipt the date this document is filed by the Florida Department of State)	
ated 02-17-201	<u>4</u> .
0B-2C-1	
Signature of a member or a	authorized representative of a member
TIFFANY D BAYLEY	winted pages of curaus

Page 3 of 3

Filing Fee: \$25.00

