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[JUL 1 8 2013

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jewelry Design of Sumter Co., LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sundeep Gulati

Name of Person

Jewelry Design of Sumter Co., LLC

Firm/Company

2696 West Torch Lake Drive

Address

The Villages, FL 32163

City/State and Zip Code

Brownwood.Jewelers@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sundeep Gulati

....352 \ 58

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

□ \$25 Filing Fee

■ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Jewelry De	esign of Sumter Co., LLC	
2. (a) Principal office address of limited liability (Note: MUST BE STREET ADDRESS)	company; 2696 West Torch Lake Drive The Villages, FL - 32163	
(b) Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	1y: 2696 West Torch Lake Drive The Villages, FL - 32163	
08/06/2012	L12000101119	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office sh	nown on the records of the Florida Dept. of State:	
Registered Agent:	Sundeep Gulati	·
Registered Office Address:	1040 Bichara Blvd. Ledy Leke, FL 32159	_
	के राज्य	
(b) Enter name of <u>NEW Registered Agent</u> and	ボイ フ	il
NEW Registered Agent:		<u> </u>
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2696 West Torch Lake Drive	
MOST BE TEORIDA BIREET ADDRE	The Villages ,FL 32163	_
and the business office of the registered agent will liability company, it is hereby confirmed that the c	de, the Florida street address of the registered office l be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote s otherwise provided in the articles of organization or	of
Synder (gulut) Printed or typed name of signee	ent and agree to act in this capacity. I further agree to the proper and complete performance of my duties of my position as registered agent as provided for in led to merely reflect a change in the registered office occupany has been notified in writing of this change.	to
Signature of Registered Agent		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00