

L14 000030953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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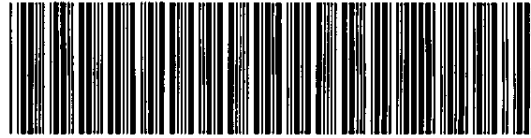
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 31 2014

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SCHER LLP

Attorneys At Law

ERIC D. SCHER, ESQ.
561-210-8569

ESCHER@FURNARISCHER.COM
ADMITTED IN FLORIDA AND NEW YORK STATE

July 23, 2014

Via First Class Mail

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

Re: Onix Solutions, LLC

Ladies and Gentlemen:

Enclosed please find the Articles of Amendment to the Articles of Organization of the above-named company. A check for the filing fee is enclosed.

Please contact the undersigned at (561) 210-8569 if you have any questions.

Very truly yours,



Eric D. Scher

2014 JUL 28 PM 14
DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

Encls.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ONICX SOLUTIONS, 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:

Eric D. Scher, Esq.
Name of Person

Furnari Scher LLP
Firm/Company

1200 North Federal Highway, Suite 200
Address

Boca Raton, FL 33432
City/State and Zip Code

escher@furnarischer.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric Scher at **561 210-8569**
Name of Person Area Code Daytime Telephone Number

2014 JUL 28 PM 14
STATE OF FLORIDA
DIVISION OF CORPORATIONS

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & 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**

Onicx Solutions, 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 February 24, 2014 and assigned Florida document number L14000030953.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Silver Unpolished, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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STATE

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

City

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Rachel Silver Cohen	11755 Bayfield Drive	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33498	<input type="checkbox"/> Remove
MGRM	Andrew Cohen	11755 Bayfield Drive	<input type="checkbox"/> Add
		Boca Raton, FL 33498	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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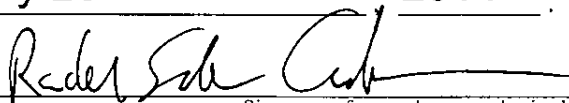
2014 JUL 28 2:14 PM
 SECRETARY OF STATE
 ELECTRONIC REGISTRATION

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 23 2014



Signature of a member or authorized representative of a member

Rachel Silver Cohen

Typed or printed name of signee

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TALLAHASSEE, FLORIDA