## L14000040060

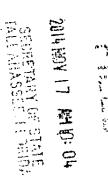
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## **COVER LETTER**

**%**,:

TO: Registration Se Division of Con				
Crystals	And Lace LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		•
Please return all correspo	ondence concerning this matter	to the following:		
	Jay M. Needelman,	СРА		
		Name of Person		•
		Firm/Company		E 9 20
	520 West 47th Stree	et		上台 <b>五</b>
		Address	-	
	Miami Beach FI 331	40		2014 MOV 17 MAN DE OUT
	400@!	City/State and Zip Code		<u> </u>
	cpa160@aol.com E-mail address: (	to be used for future annual report notifica	ition)	## <b>P</b>
For further information c	oncerning this matter, please c			
Jay M. Needelman	ı, CPA	305 673-5040		
	f Person	at () Area Code Daytime To	elephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filir	o Fee
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate Certified C	of Status &
MAILING ADDRESS: Registration Section		STREET/COURIER	ADDRESS:	

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Crystals And Lace LLC			
(Name of the Limit	ed Liability Compar (A Florida Limited L	ny as <mark>it now appears on ou</mark> liability Company)	r records.)
The Articles of Organization for this Limited Li Florida document number L14000040260	ability Company	were filed on <u>3/11/14</u>	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	7.50
The new name must be distinguishable and end with the	words "Limited Liab	ility Company," the designa	ation "LLC" or the abbreviation [L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		40 Harrison Stree	et, Unit #31-G
		New York NY	
Enter new mailing address, if applicable:		10013 40 Harrison Stree	et, Unit #31-G
(Mailing address MAY BE A POST OFFICE BOX)		New York NY	
		10013	
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	Jay M. Nee	e: delman, CPA	records, enter the name of the new
New Registered Office Address:	520 West 4		
		* Enter Florida str	
	Miami Beac	,,	, Florida 33140
		City	zip Coue

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:

<u>Title</u>	Authorized Member  Name	<u>Address</u>	Type of Action
MGR	Romero, Lourdes	9241 Carlyle Ave., Surfside, FI, 33154	□ Add
			Remove
MGR	Romero, Lourdes	40 Harrison St 31G New York Ny 1001	A A
		-	Remove
			Add
			□ Remove
			Add
		<u> </u>	_ Remove
			_□ Remove
			Add
			_□ Remove

D. If amendi	ng any other information,	enter change(s) here: (Attach additional s	sheets, if necessary.)	
K	emove Addre	11: 9241 CAY/y/e1	Tve	_
(ii	all files)	Surfsiole F/331		_
A	do This Addre	1		_
		40 HATTISON ST. A.		_
		New York MY 1001	3	_
(The effective	date, if other than the date e date must be specific, cannot be p s document is filed by the Florida I	prior to date of receipt or filed date and cannot be mor	(optional) re than 90 days after	
Dated	vember 10	2014		
	Rounday La			
	_	sture of a member or authorized representative of a r	nember	2 <b>5</b>
	Lourdes Romero	Town I was always a first	August August Was	
		Typed or printed name of signee	( ) ( ) ( ) ( )	
			•	# <b>5</b>

Page 3 of 3

Filing Fee: \$25.00