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SECRETARY OF STATE
TALL AHASSEE, FLORID

COVER LETTER

	legistration Sect Division of Corpo			5
orm inc	Snap It Je	welry, LLC		
SUBJEC	l:	Name of Limit	ted Liability Company	
The enclo	sed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please ret	urn all correspond	dence concerning this matter to	o the following:	
		Cynthia B. Beissel, E	squire	
			Name of Person	
			Firm/Company	
		10 Petrea Terrace		
			Address	
		Ormond Beach FL 32	2174	
			City/State and Zip Code	
		CBB@Hassell-Legal.		
		E-mail address: (to	o be used for future annual report notificat	ion)
For furthe	r information cor	ncerning this matter, please cal	11:	
Cynthia	B. Beissel		386 615-1943	
	Name of I	Person	Area Code Daytime Te	elephone Number
Enclosed	is a check for the	following amount:		
\$25.0	0 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

SNAP IT JEWELRY, 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 Lie	ability Company were filed on May 8, 2014	and assigned
Florida document number L14000074702	·	
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end with the w	vords "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	(ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE E	<u> </u>	
	or registered office address on our records, <u>enter</u>	the name of the new
registered agent and/or the new registered off	ice address nere:	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	<u>>≅ </u>
·	Enter Florida street address , Florida	SE CS
	, Florida,	Zip Gode
New Registered Agent's Signature, if changing R	·	—————————————————————————————————————
		Time con the contract of the c
	l agent and agree to act in this capacity. I further ag r and complete performance of my duties, and I am	
	tered agent as provided for in Chapter 605, F.S. Or,	
being filed to merely reflect a change in the re company has been notified in writing of this c	egistered office address, I hereby confirm that the li hange.	mited liability
	If Changing Registered Agent, Signature of New Ro	egistered Agent

Page 1 of 3

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

MGR = Manager.
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Brian Beissel	10 Petrea Terrace	■ Add
		Ormond Beach, FL 32174	□ Remove
MGR	Glenn Rose	5270 Bowline Ct	■ Add
		Oxford, FL 34484	□ Remove
			
			Remove
			SECRET DANS
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			□ Remove
			□ Add
			□ Remove

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