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COVER LETTER

TO:	Registration Sec Division of Cor			
CUBI		ELS SHOES		
SUBJI	ECT:	Name of Lim	ited Liability Company	····
The en	closed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo-	ndence concerning this matter	to the following:	
		ANGELE LOVEJOY		
			Name of Person	
		LOVEANGELS SHOES		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		1285 SW 101 WAY APT	304	
			Address	· · · · · · · · · · · · · · · · · · ·
		PEMBROKE PINES, FL.	33056	
			City/State and Zip Code	· · · · · · · · · · · · · · · ·
		ALOVEJOY6181@GMAII		
		E-mail address: (to be used for future annual report noti	fication)
For fur	ther information co	oncerning this matter, please co	all:	
ANGI	ELE LOVEJOY		305 4576177	
	Name of	l Person	Area Code Daytim	e Telephone Number
Enclos	ed is a check for th	e following amount:		
□ \$ 2.	5.00 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, F1, 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



LOVEANGELS SHOES, L.L.C.

(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 NOVEMBER	and assigned
Florida document number L14000174835		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
LOVEANGELS GEMS, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1285 SW 101 WAY APT 30)4
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES, FL 33	025
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		rds, enter the name of the nev
registered agent and/or the new registered office address her	<u>e</u> .	
Name of New Businessed Asserts		
Name of New Registered Agent:		
New Registered Office Address:	e	
	Enter Florida street add	ress
		Florida
	•	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr		

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

<u>or removed</u>	from our records:		F. 17 - 2.5	
MGR = M $AMBR = A$	lanager .uthorized Member		18 DEC -3 PH 1:50	
<u>Title</u>	<u>Name</u>	Address	TALLAND SEPLONING	Type of Action
				Add
				Remove
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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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12/0 fective date, if other than the date of filing:	01/2018 (optional)
in effective date is listed, the date must be specific and cannot	be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 e applicable statutory filing requirements, this date will not be listed as
record specifies a delayed effective date, l The 90th day after the record is filed.	but not an effective time, at 12:01 a.m. on the earlier of
nted 11-28-2018	·
ated $\frac{11-28-2018}{(-2)}$	

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Filing Fee: \$25.00