

L15000 075 27

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

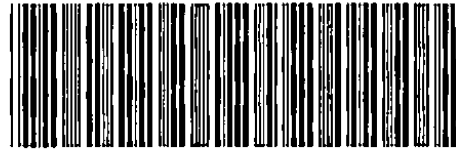
(Business Entity Name)

(Document Number)

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09/16/19--01021--005

SEP 16 2019
TALLAHASSEE, FLORIDA

SEP 30 2019
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gifted Hands Enterprise, 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:

Dartene Cruz
Name of Person

Gifted Hands Enterprise, LLC
Firm/Company

1923 Alamanda Way
Address

Riviera Beach, FL 33404
City/State and Zip Code

darlcruz6160@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dartene Cruz at (561) 460-9840
Name of Person Area Code Daytime Telephone Number

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

TO
ARTICLES OF ORGANIZATION
OF

Gifted Hands Enterprise, LLC - DB
(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

04/29/2015

Florida document number

L15000075277

This amendment is submitted to amend the following:

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

Beautifully Adorned Jewels, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrev

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1923 Alamanda W
Riviera Beach, FL

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1923 Alamanda W
Riviera Beach, FL

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

Name of New Registered Agent:

New Registered Office Address:

N
A
Enter Florida street address
City Florida Zip

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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this amendment 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title

Name

Address

N/A

N/A

E. Effective date, if other than the date of filing: 05/24/2019 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the
(b) The 90th day after the record is filed.

Dated 09-12-2019

Dartene Cruz

Signature of a member or authorized representative of a member

Dartene Cruz

Typed or printed name of signee