

LN000071190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

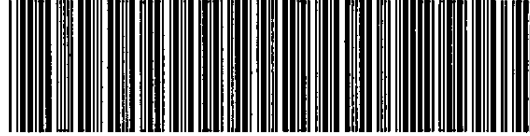
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/23/16--01012--023 **60.00

FILED
16 OCT 11 AM 10:45
CLERK OF COURT
JULIA L. HARRIS

OCT 12 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXQUISITE ASSETS 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:

MICHAEL FERREIRA
Name of Person

EXQUISITE ASSETS LLC
Firm/Company

4411 BEE RIDGE RD #177
Address

SARASOTA, FL 34233
City/State and Zip Code

MIKE @ GOLD AND SILVER EXCHANGE, COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL FERREIRA at (941) 320-2996
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 25, 2016

MICHAEL FERREIRA
4411 BEE RIDGE RD #177
SARASOTA, FL 34233

SUBJECT: EXQUISITE ASSETS LLC
Ref. Number: L16000071190

2017 OCT 11 PM 3:18
CALLED 10/11/16

We have received your document for EXQUISITE ASSETS LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is F96000005254.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 616A00018090

FILED
OCT 11 2016
TALLAHASSEE
FLORIDA
16 OCT 11 AM 10:46

TO
ARTICLES OF ORGANIZATION
OF

EXQUISITE ASSETS 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 4/11/2016 and assigned
Florida document number L16000071190

This amendment is submitted to amend the following:

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

SILVER AND GOLD EXCHANGE LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

16 OCT 11 AM 10:46	FILED CLERK OF COURT STATE OF FLORIDA TALLAHASSEE
N/A	

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A	
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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:

N/A		
Enter Florida street address		
City	Florida	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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		N	<input type="checkbox"/> Change
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U.S. DEPARTMENT OF JUSTICE

N/A

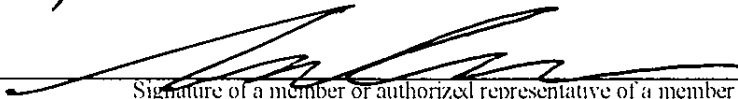
E. Effective date, if other than the date of filing: _____ (optional)

(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.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 earlier of:
(b) The 90th day after the record is filed.

Dated 8/17/16



Signature of a member or authorized representative of a member

MICHAEL FERREIRA

Typed or printed name of signee