117000045735

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COVER LETTER

TO: Registration Section Division of Corpor		
SUBJECT: 206	Name of Limited Liability Company	_
The enclosed Articles of Am	nendment and fee(s) are submitted for filing.	
Please return all corresponde	ence concerning this matter to the following:	
	EDUARDO EGUIZABAL Name of Person	<u>~</u>
	Firm/Company	
	14852 5 MILITARY TRAIL	
,	OELRAY BEACH FC 32484 City/State and Zip Code	
_	E-mail address: (to be used for future annual report notification)	
	perning this matter, please call:	,
Name of Per	al (304) 553 - 030 Area Code Daytime Telephone Num	mber
Enclosed is a check for the fo	ollowing amount:	
\$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	0 Filing Fee, ificate of Status & ified Copy ional 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

EDDIE'S JEWELERS LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL17000045735	were filed on <u>02-27-2017</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:	EDDIE'S JEWELERS LLC	
(Principal office address MUST BE A STREET ADDRESS)	14852 S MILITARY TRAIL	
2 meipin vijnee miniesis vii esi 1927 vii vii vii vii vii vii vii vii vii vi	DELRAY BEACH FL 33484	
Enter new mailing address, if applicable:	EDDIE'S JEWELERS LLC	
(Mailing address MAY BE A POST OFFICE BOX)	14852 S MILITARY TRAIL	3
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, enser the	name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zin 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>tle</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			☐ Remove
			
			☐ Remove
		***	☐ Change
			□ ∧dd
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		41 Fig. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	FESTAL Add
			□ Remove

	on, enter change(s) here: (Attach additional sheet.	, , , , , , , , , , , , , , , , , , ,
	get a list of	
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Tective date, if other than the d	ate of filing:	(optional)
ocument's effective date on the Dep	effective date, but not an effective time, at 1	
may 5	2017	
1. 01		
9 danso E	gunden ?	₹ 2
9	ignature of a member or authorized representative of a member	
EDUARDO EQUIZABA	L	AR AY
	Typed or printed name of signee	<u> </u>
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	Page 3 of 3	STA = C
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Filing Fee: \$25.00