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D. SCOTT DEC 1 9 2017

COVER LETTER

TO:	Registration Se Division of Cor		gr.		
SUBJE		INE JEWLRY, LLC			
OCDUL,		Name of Lir	nited Liability Company		
		Amendment and fee(s) are sul	-		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		ERIC J. COHEN			
			Name of Person		
		TOMLINSON & COHEN	CPA, PA		
			Firm/Company		
	Firm/Company 4755 TECHNOLOGY WAY, SUITE 202 Address				
		-	Address		
		BOCA RATON, FL 3343	H		
			City/State and Zip Code		
		ECOHEN@BOCACPA.X			
			to be used for future annual report notific	ation)	
For furth	ner information c	oncerning this matter, please c	all:		
ERIC J.	COHEN		561 948-0706		
	Name o	f Person	at () Area Code Daytime	Telephone Number	
				•	٦ ,
Enclosed	is a check for th	ne following amount:			
■ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Eiling Certificate (Certified Co (additional cop	g Fee. of Status &

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

TARYA FINE JEWLRY, 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 $\frac{08/21/2017}{}$ and assigned Florida document number L17000178782 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TARYA FINE JEWELRY, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address

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

_. Florida _

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

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			□ Add
			Remove
			☐ Change
			□ Add
			Remove
			Change
			Add 3
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			Change
		·	Remove
			☐ Change

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ERIC J. COHEN. REGISTERED AGENT	1
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