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|-------------------------|--------------------|-------------------|
| (Re                     | equestor's Name)   |                   |
| (Ad                     | dress)             |                   |
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| (C3                     | ty/State/Zip/Phone | . <del>(1</del> ) |
| (CII                    | ty/State/Zip/Phone | : #)              |
| PICK-UP                 | WAIT               | MAIL              |
| (Bu                     | ısiness Entity Nam | ne)               |
| (Do                     | ocument Number)    |                   |
| Certified Copies        | _ Certificates     | of Status         |
| Special Instructions to | Filing Officer:    |                   |
|                         |                    |                   |
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2019 (\*\* 119 | 111 | 3:59

Amend

JUN 28 2019 I ALBRITTON



TO: Registration Section
Division of Corporations

Uniquely Diamond, LLC

| SUBJECT:               |  | ited Liability Company  | <del></del>   |
|------------------------|--|---|---|
|                        |  |   |   |
| The enclosed Article   | s of Amendment and fee(s) are sub              | mitted for filing.  |   |
| Please return all corr | espondence concerning this matter              | to the following:   |   |
|                        | Diamond J Trody                                |   |   |
|                        |  | Name of Person  |   |
|                        |  | Firm/Company  |   |
|                        | 8200 S Coral Cir                               |   |   |
|                        | North Lauderdale, FL 3306                      | Address<br>68   |   |
|                        | uniquelydiamond1@gmail.                        | City/State and Zip Code   |   |
|                        | E-mail address: (                              | to be used for future annual report notifi                          | ication)  |
| For further informati  | on concerning this matter, please co           | all:  |   |
| Diamond J Trody        |  | 786 859-4368<br>at ()   |   |
| Na                     | me of Person                                   | Area Code Daytime   | Telephone Number  |
| Enclosed is a check (  | or the following amount:                       |   |   |
| ■ \$25.00 Filing Fe    | e □ \$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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Uniquely Diamond, LLC   |  |                         |
|---|--|-------------------------|
| (Name of the Limited Liability<br>(A Florida L  | Company as it now appears on our records.) imited Liability Company) |                         |
| The Articles of Organization for this Limited Liability Co  |  | and assigned            |
| his amendment is submitted to amend the following:  |  |                         |
| A. If amending name, enter the new name of the limit  | ed liability company here:   |                         |
| The new name must be distinguishable and contain the words "Limite  | ed Liability Company," the designation "LLC" or th                   | e abbreviation "L.L.C." |
| Inter new principal offices address, if applicable:   |  |                         |
| Principal office address MUST BE A STREET ADDRE   | ESS)   |                         |
| Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>                | <del></del>  | 2019 :                  |
| 3. If amending the registered agent and/or registeregistered agent and/or the new registered office addre |  | <u> </u>                |
|   |  | 2                       |
| Name of New Registered Agent:   |  |                         |
| New Registered Office Address:  | Enter Florida street address   |                         |
|   | Enter r tortaa street daaress  |                         |
|   | , Florida  | <del></del> _           |
|   | City .   | 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.

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>     | <u>Address</u>                                 | Type of Action |
|--------------|-----------------|--|----------------|
| MGR          | Diamond J Trody | 8200 S Coral Cir<br>North Lauderdale, FL 33068 | ■ Add          |
|              |                 |  | □ Remove       |
|              |                 |  | Change         |
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| Effective date, if other than t<br>(If an effective date is listed, the date r<br>Note: If the date inserted in this<br>document's effective date on the | block does not meet the applicab           | date of filing or more than 90 day<br>ole statutory filing requirement | (optional) s after filing.) Pursuant to 605.020' is, this date will not be listed as |
|  |  |  |  |
| the record specifies a delay  The 90th day after the r   | ed effective date, but not ecord is filed. | an effective time, at 12   | :01 a.m. on the earlier o  |
| Dated June 13,   | 2019                                       | _•   |  |
|  |  |  |  |
|  | )  |  |  |
|  | ns That Signature of a member or author    |  |  |

Page 3 of 3

Filing Fee: \$25.00