L21000008807

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. COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: ANTILLAS JEWELS 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:			
Williams J. Armas Perez			
Antillas Jewels LLC Firm/Company			
2475 Michigan AVE Unddress			
Kissimuee FL 34744 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Williams Atmas at (S61) 249 - 9147 Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
☐ \$25.00 Filing Fee			
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF VIOLENCE OF A COMMON OF A C

ANTILIAS JEWELS (Name of the Limited Liability Compa (A Florida Limited)	LLC 21 APR	14 AM 10: 43
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 21000008807</u> .	were filed on 12 /30/ 2020	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 Liabil	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2475 MicHiGAN AV KISSIMMEE FL 34744	JÉ
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2475 MicHIGAN AVE KissiMMCE FL 34744	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	
	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 added or removed from our records:

MGR = Manager UNISHE TAKE TO STATE AMBR = Authorized Member Address Type of Action Name Title 21 APR 14 AH 10: 43 _____ □Add _____ 🗆 🗀 Add _____ □Change _____ □Remove _____ Change _____ 🗆 🗀 Add □ Change _____ __ __ __ __ __ \Add □Remove ______ □Change □Add _____ □Remove

D. If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary,) Fig. 184 1 of Sheets Fig. 184 1 of Sheets Fig. 184 1 of Sheets
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	,
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(ole statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective date, but not an effective tim record is filed.	e, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated 400 11 2021 Signature of a member or authoric	zed representative of a member
Williams J. Typed or printed	