L21 0000 88955

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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T. MATTHEWS MAR 28 2022

COVER LETTER

Division of Co			
A GEM BO	DUTIQUE LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	_	
	ANDREA L GUERRERO	ı	
		Name of Person	
	A GEM BOUTIQUE LLC		
		Firm/Company	
	2792 SW FONDURA RD		
		Address	
	PORT ST. LUCIE, FL 349	953	
	AGEMBOUTIQUE@GMA	City/State and Zip Code	
	E-mail address: (to be used for future annual report	t notification)
For further information of	concerning this matter, please c	all:	
ANDREA L GUERRER	0	772 924-58. at () Area Code De	31
Name o	f Person	Area Code Da	sytime Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &
Mailing Addres		Street Addres	
Registration S Division of C		Registration Division of	Section Corporations
D O Doy 622		The Centre	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 HOURS FOR 12: 19

A GEM BOUTIQUE LLC		
(Name of the Lin	nited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited		2/22/21
Florida document number L21000088955	·	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, <u>enter the new name</u>	of the limited liability company	here:
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 appl	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
	•	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>	<u> </u>
·		
B. If amending the registered agent and/or	registered office address on our	records, enter the name of the new registere
ngent and/or the new registered office addr	ess nere:	•
Name of New Registered Agent:	ANDREA L GUERRERO	
New Registered Office Address:	2792 SW FONDURA RD	
new regimeres varies a variety	Enter Fl	orida street address
·	PORT SAINT LUCIE	, Florida ³⁴⁹⁵³
	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, <u>enter the title, name, and address of each person-being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	TYSZKO ADRIENNE MICHELLI	2792 SW FONDURA RD	
		PORT ST. LUCIE, FL 34953	■Remove
·		-	□Add
			□Remove
			Change
		·	□Remove
			OÇhange
		·	
			□Remove .
			□Change
	:		□Add
			□Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			□Change

ADRIENNE M TYSZKO	D. PLEASE CHANGE THIS ARTICLE TO REFLECT NEW REGISTERED AGENT.
ARTICLE III SHOULD	READ: ANDREA L GUERRERO
2792 SW FONDURA RI	DPORT ST. LUCIE, FL 34953
 	· · · · · · · · · · · · · · · · · · ·
-	·
	
	
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<u>Yote:</u> If the date inserted in thi	the date of filing:
record specifies a delayed effe d is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated MARCH 3	2022
	Vi
	352. · 6533000 . · .

Filing Fee: \$25.00