L21000434690

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section

ANGEL A	TOTTOLI JEWELRY LLC		•
SUBJECT:	Name of Lin	mited Lightlity Company	
	Name of Life	meu Blaomty Company	
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	RC	SANGELA TOTTOLI	
		Name of Person	·
		Firm/Company	
	3	8859 NW 62ND CT	
		Address	·
	COCON	TUT CREEK FLORIDA 3307	3
	a_totto	City/State and Zip Code	
	E-mail address:	to be used for future annual report i	notification)
For further information of	concerning this matter, please o	all:	
ROSANGELA TOTTO	LI	561 662-3863	3
Name o	of Person	at ()	time Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$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 enebro
Mailing Address Registration S Division of C	Section	Street Address: Registration S Division of C	Section
P.O. Box 632 Tallahassee, I	.7	The Centre of	f Tallahassee roe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 OCT 15 AM 2:59

	TOTTOLI JEWELRY LLC	SECRE	IARY OF TOTAL
(Name of the Limited Lia (A Flo	bility Company as it now appeared Limited Liability Company)	rs on our records.) 🔠	ASSEE, F
(-11-1	, and the same same same same same same same sam		Ø
The Articles of Organization for this Limited Liability	· · · · —	10/04/2021	and assigned
Florida document number L21000434690			
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liability company ho	ere:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the d	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	DRESS)		
			
Enter new mailing address, if applicable:	-	-	
(Mailing address MAY BE A POST OFFICE BOX)			
D. I.G.			
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our re ::	ecords, <u>enter the na</u>	me of the new registered
	•		
Name of New Registered Agent:			
	· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	Enter Flor	ida street address	
		Et and de	
	City	, Florida _	Zip Code
New Registered Agent's Signature, if changing Register	red Agent:		
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered heing filed to merely reflect a change in the registe company has been notified in writing of this change	complete performance of agent as provided for in C red office address, I hereb	my duties, and Lan hapter 605, F.S. O	familiar with and r, if this document is

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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ROSANGELA TOTTOLI	3859 NW 62ND CT	■ Add
		COCONUT CREEK FL 33073	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing:
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated 10 04 2021 Signifure of a member or authorized representative of a member
The state of a filter of a fil
Typed or printed name of signee

Filing Fee: \$25.00