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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ity/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

A. RIVERS
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2022 JAN 14 AM 8: 11

SECRETARY OF STATE TALLAHASSEE, FL

January 5, 2022

KIMBELY YOUNG 1201 NW 44TH STREET MIAMI, FL 33142

SUBJECT: KIM'S FANCY JEWELRY LLC

Ref. Number: L21000491899

We have received your document for KIM'S FANCY JEWELRY LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 822A00000260

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: KI	Name of Limi	ted Lability Company	<u>lv \</u>
The enclosed Articles of	Amendment and fee(s) are subt	mitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Kinne	June of Person	
	Kiny 90	CONTRACTOR STATE OF THE STATE O	elry_
	1901 NW	Address Style	24-
	MICUNI FOUNDS	Chty/State and Zip Code Chty/State and Zip Code Chty/State and Zip Code O be used for future annual report notified	COI)
For further information c	oncerning this matter, please ca	ill:	
KNDEAL Name of	iderson (1)	at (<u>12</u>) <u>St.C.</u> Area Code Daytimo	2075 e Telephone Number
Enclosed is a check for the	ne 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 enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 Comp	any were filed on	and assigned
Florida document number A 1005515	79	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited		
The new name must be distinguishable and contain the words "Limited L	nability 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)	N-1A-	- 202 - 202
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, enter the	
Name of New Registered Agent:	N/A	TD PH 12: 48
New Registered Office Address:	Enter Florida street address	
	Citr	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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
agr	Kin Kerly Kurg	19011CC-1411 1St MICHAIL TO 33H5	Add
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menecu ote: If	date, if other than the date of filing: (optional) (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0201 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
ecord s is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	5000 DODA.
	Signature of a member of authorized representative of a member
	Kimbeald Your Ya