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COVER LETTER

	Registration Sec Division of Corp			•				
CHD IEZ		Empwr Jewelry LLC						
SUBJEC	1:	Name of Limited Liability Company						
The enclo	sed Articles of a	Amendment and fee(s) are sub-	nitted for tiling.					
Please ret	um all correspo	ndence concerning this matter t	to the following:					
		Taylor Cassidy						
			Name of Person					
		Stanton IP Law Firm P.A.						
			Firm/Company	· · · · · · · · · · · · · · · · · · ·				
		201 E. Kennedy Blvd., Sui	tc 1900					
			Address					
		Tampa, Florida 33602						
			City/State and Zip Code					
		tcassidy@stantoniplaw.com		 				
		E-mail address: ()	to be used for future annual report notif	ication)				
For furthe	er information c	oncerning this matter, please ca	all:					
Taylor C	assidy		813 421-3883					
	Name o	f Person	at ()at () Area Code Daytime	: Telephone Number				
Enclosed	is a check for the	he following amount:						
■ \$25.0	00 Filing Fee	S30.00 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)				
			Carrie Address					

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

EMPWR JEWELRY LLC (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 Company were filed on 04/07/2022 Florida document number <u>L22000167721</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SINGING MAGNOLIAS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

Cuv

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			Remove
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E. Effective date, if other than the of the effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicabl	e statutory liling requireme	ents, this date will not be listed as th
f the record specifies a delayed b) The 90th day after the reco	effective date, but not a rd is filed.	in effective time, at 1	2:01 a.m. on the earlier of:
Dated May 17	. 2022	No Pro	τ.
<u></u>	Signature of a member or authorize	ed representative of a member	
		7	
Jennifer Fleites			

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