

L23000097614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

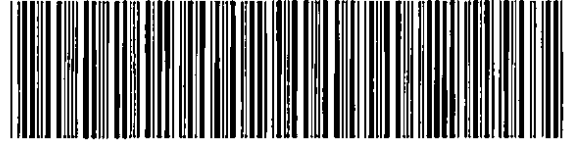
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TALLAHASSEE, FLORIDA

VA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MF JEWELRY & DESIGN 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:

MARIA O. FUMAGALLI
Name of Person

MF JEWELRY & DESIGN LLC
Firm/Company

6275 SANDS LAKE VISTA DR. APT. 3207
Address

ORLANDO, FL 32819
City/State and Zip Code

JEWELRY BY MARIA LLC @ GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA FUMAGALLI at (808) 431-1468
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

MF JEWELRY & DESIGN 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 02/23/2023 and assigned
Florida document number L23000097614.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JEWELRY BY MARIA LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

16878 ARROWHEAD BLVD.

WINTER GARDEN, FL ~~32789~~ 34787

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

16878 ARROWHEAD BLVD.

WINTER GARDEN, FL 34787

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:

MARIA EUGENIA DE OLIVEIRA FUMAGALLI

New Registered Office Address:

16878 ARROWHEAD BLVD

Enter Florida street address

WINTER GARDEN

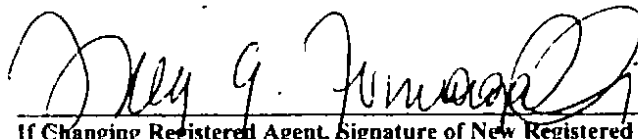
City

Florida

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

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TALLAHASSEE, FLORIDA

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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FALLAHABSEF FLORIDA

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MARIA EUGENIA DE OLIVEIRA FUMAGALLI
Typed or printed name of signee