## L23000231566

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TALAN TO THE





August 2, 2023

ASHLEY BEARDSALL 124 RIVER LANDING AVE ST AUGUSTINE, FL -5

SUBJECT: AVERY BROOKS DESIGNS AND JEWELRY LLC

Ref. Number: L23000231566

2023 AUG 21 AM 10: 31 S

We have received your document for AVERY BROOKS DESIGNS AND JEWELRY LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1). Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 623A00017336

Octavia L Simmons Supervisor

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: AVELY BROOKS DESIGNS AND JEWELLY US.  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:
ASHLEY BEARDS ALL Name of Person
AVERY BROOKS DESIGNS AND JEWELRY UC Firm/Company
124 PINER LANDING DRIVE
ST_AUSTINE_FU_33095  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ASHLEY BEALDSAL at (352) 537-0222  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address:  Registration Section  Street Address:  Registration Section

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

AVERY BROOKS DESIGNS AND TEWERN UC PH 1:20

(Name of the Limit	ted Liability Compar (A Florida Limited L	iv as it now appears o iability Company)	n our records.),	· ,
The Articles of Organization for this Limited L Florida document number <u>L2300023</u>		were filed on <u>ty</u>	36020171	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liabi	lity company here	;	
The new name must be distinguishable and contain the v	vords "Limited Liabili	ty Company," the desig	gnation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applic	rable:		<del></del>	
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BON)			
				· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or agent and/or the new registered office addre		ddress on our reco	ords, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:	ASHLE	y BEARDS	AU	
New Registered Office Address:	124 RV	FELANDA Enter Florida	DENE_ street address	<u>.</u>
	STAVA	STINE	Florida	32095 Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	- engr		-2-7- 120110

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
			□Add
			Remove
			□Change
			□Add
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			□Remove
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). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
(If an et <u>Note:</u>	tive date, if other than the date of filing:
the reco	rd 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 iled.
Datec	A Description of the second of
	Signature of a member or authorized representative of a member
	ASHUEY BEARDS ALL Typed or printed name of signee