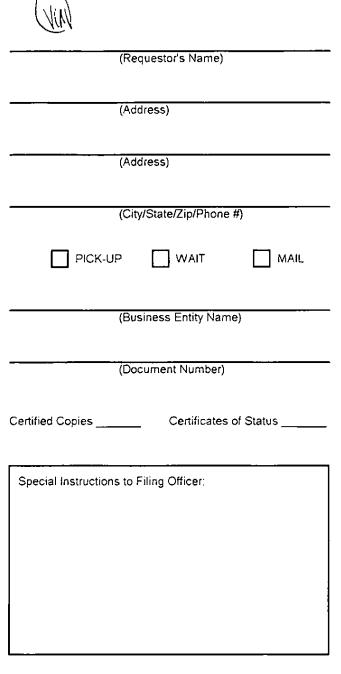
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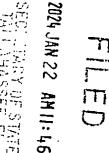


Office Use Only



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COVER LETTER

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	egistration Se ivision of Cor				
SHELECT		ELRY JASZ LLC			
SUBJECT	:	Name of Lin	nited Liability Company		
The enclose	ed Articles of .	Amendment and fee(s) are sub	emitted for filing.		
Please retu	rn all correspo	ndence concerning this matter	to the following:		
		JUAN A SANCHEZ SAN	TOS		
			Name of Person		
		WOLFJEWELRY JASZ I	LLC		
			Firm/Company		
		1313 BOYNTON BEACH	BLVD#6		
			Address		
		BOYNTON BEACH, FL 33426			
			City/State and Zip Code		
		wolfjewelry2023@gmail.co	om to be used for future annual report notification)		
For further	information co	oncerning this matter, please c	·		
	ANCHEZ SA	-	786 378-0471		
	Name of	Person	at () Area Code Daytime Telephone	: Number	
Enclosed is	a check for th	ne following amount:			
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)	
	ailing Address egistration S		Street Address: Registration Section		
	ivision of C		Division of Corporations	3	
	O. Box 632		The Centre of Tallahasse	The Centre of Tallahassee	
Tallahassee, FL 32314		·L 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WOLFJEWELRY JASZ LLC			
(Name of the Limits	d Liability Company as it now appe A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Lia Florida document number L23000293818	ability Company were filed on <u>0</u>	06/19/2023	and assigned
This amendment is submitted to amend the follo	wing;		
A. If amending name, enter the new name of	the limited liability company l	nere:	
WOLF JEWELRY JASS LLC			
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the	designation "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREE)	(ADDRESS)	W ^o	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office address on our	records, enter the name of	JAN PO D Sie new registered
Name of New Registered Agent:		.	
New Registered Office Address:	1313 BOYNTON BEACH BLV	TD # 6 orida street address	
	BOYNTON BEACH	Florida 33426	

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.

City

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

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
		·	Change
			□Add
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: If me officitive 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 605.0207 is More than 100 days after filing and the objective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as idocument's effective date on the Department of State's records. 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 religious date of the date o	traniciong any other information	on, enter change(s) here: (Attach additional sheets, if necessary.)
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Filing Fee: \$25.00