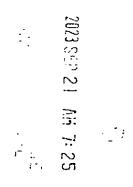
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COVER LETTER

TO: Registration So Division of Cor	ection porations	•	
	ARTER CUSTOM JEWELRY	design LLC	
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	CECIL T CARTER		
		Name of Person	
	TRAVIS CARTER CUST	OM JEWELRY DESIGN LLC	
		Firm/Company	•
	8306 COQUINA AV		
		Address	
	FORT PIERCE FL 34951		
		City/State and Zip Code	
	JEWLTECK@AOL.COM E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	•	, and the second
CECIL T CARTER		772 216-7697	
Name o	f Person	Area Code Daytim	re Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 5		<u>Street Address:</u> Registration Se	ction
Division of C	orporations	Division of Cor	porations
P.O. Box 632	.7	The Centre of T	fallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRAVIS CARTER CUSTOM JEWELRY DESIGN LLC

2023 SEP 21 All 7: 25

The Articles of Organization for this Limited Liability Company were filed on 9/11/2023 and assigned Florida document number L23000423337 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 registeragent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	(<u>Name of the Limited Liability Compa</u> (A Florida Limited I.	ny as it now appears on our records.) Liability Company)		
A. If amending name, enter the new name of the limited liability company here: 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) 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:		were filed on 9/11/2023	and assigned	- <u>I</u>
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) 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:	This amendment is submitted to amend the following:			
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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	A. If amending name, enter the new name of the limited liabi	ility company here:		
(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:	The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abl	oreviation "L.L.C."	
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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter new principal offices 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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	(Principal office address MUST BE A STREET ADDRESS)			_
(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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:				
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Name of New Registered Agent: New Registered Office Address:	(Mailing address MAY BE A POST OFFICE BOX)			
Name of New Registered Agent: New Registered Office Address:				 -
New Registered Office Address:		address on our records, enter the name	e of the new regi	<u>stered</u>
New Registered Office Address: Enter Florida street address	Name of New Registered Agent:			
Enter Florida street address	New Registered Office Address:			
		Enter Florida street address		
, Florida		, Florida	7: 7: 7:	

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CECIL T CARTER	8306 COQUINA AV, FORT PIERCE FL 34951	= Add
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			DChange
			□Add
			Remove
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ective date, if other than effective date is listed, the date e: If the date inserted in the ument's effective date on the	must be specific and is block does not n	i cannot be prior to neet the applicab	date of filing or models statutory filing	ethan 90 days after the green transfer than 90 days after the green transfer the green transfer than 1900 and 1900 are the green transfer to the green transfer transfer to the green transfer tra	t onal) er filing.) Pursuant to iis date will not be	605.020 fisted a
	ective date, but not	an effective time	e, at 12:01 a.m. c	on the earlier of: (b) The 90th day a	ifter the
ord specifies a delayed efficient.						
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filed.	- Contin	2023	- -			
filed.	Cartin Signature of a 1	2023 member or authoriz	zed representative	of a member		-

Filing Fee: \$25.00