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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LA FAMA JEWELRY LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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CT 2.	
TALLAHASSEE, FLORIS.)

Or	MOSEE FLORID
LA FAMA 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 3/25/2024 Florida document number <u>L24000145011</u>	and assigned
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 Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7802 NW 103 St
(Principal office address MUST BE A STREET ADDRESS)	SUITE 115
	HIALEAH GARDENS, FL 33016
Enter new mailing address, if applicable:	7802 NW 103 St
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 115
	HIALEAH GARDENS, FL 33016

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:	CAMPOS MAYOR, JEAN I.	
New Registered Office Address:	7802 NW 103 St, SUITE 115	_
	Enter Florida street address	
	HIALEAH GARDENS, Florida 33016	
	City 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

MGR = Manager

_ 🗆 Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CAMPOSMAYOR, JEAN I.	7802 NW 103 St	□Add
		Suite 115	□Remove
		SUITE 115 HIALEAH GARDENS, FL 3301	A Change
			🗆 Add
			□Remove
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ffective date, if other an effective date is listed to the locument's effective d	i, the date must be speci ted in this block does	tic and cannot be prior to not meet the applica	31/24 o date of filing or more ble statutory filing r	(optiona than 90 days after f lin equirements, this da	l) g.) Pursuant to 605,0207 e will not be listed as t	(3)(b) the
record specifies a dela d is filed.						
DatedOc7	//3/ Signature	2024	·			
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Typed or printed name of signee