Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: SANDRA CASTILLO TAX SERVICE LLC Account Name

Account Number : 120190000047 : (407)205-0002 Phone Fax Number : (866)704-9120

**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 DARCY'S FINE JEWELRY LLC

Certificate of Status	0
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Help

K. SALY

2 2025 JAN

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

	Registration So Division of Cor				
812B 1127	*** * *	DARCY'S F	TNE JEWEERY LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
			Name of Person		
		DAR	CY'S FINE JEWELRY LLC		
			Firm Company		
			Address		
			City State and Zip Code		
		E-mail address: (to be used for future annual report no	offication)	
For furth	er information c	oncerning this matter, please co	all:		
SAN	NDRA DANI	S RAMOS		2	
	Name o	f Person	at (407 —) 205-0002 Area Code — Daytime Telephone Number		
Enclosed	is a check for th	te following amount:			
□ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres Registration S Division of C	Section	Street Address: Registration S Division of C		
P.O. Box 6327		The Centre of Tallahassee			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



DARCY'S FINE JEWELRY	T.L.C	TALLAHASSET FLURIO,
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records hability Company)	J - FLURIÒ,
The Articles of Organization for this Limited Liability Company Florida document number 1.24000±73994	were filed on 41.08/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC"	or the abbreviation "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 a agent and/or the new registered office address here:	ddress on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
***************************************		rida
	Cin	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 jurther 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.

To: hulf - Page: 4 of 5 2024-12-28 19:01 10 GMT 18667049120 From Sandra Danis Ramos

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 = Anthorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MUHYI, SAED SHWIQI	4801 LAKE PICKETT DR	■Add
		GROVELAND, FL 34736	<u>E</u> Remove
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			□Change

To: null - - Pager 5 of 5 2024-12-28 19 01 10 GMT 18667049120 From Sandra Danis Ramos

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Filing Fee: \$25.00