

P14000091277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 NOV 24 AM 5:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Amel
NOV 24 2015

R. W. W. W.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2015

DAVID BERNDT
411 N DONNELLY ST STE 108
MOUNT DORA, FL 32757

SUBJECT: ARISTOCRAT JEWELERS, INC.
Ref. Number: P14000091277

We have received your document for ARISTOCRAT JEWELERS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have checked two boxes under adoption of amendment. Please only check one box.

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) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 315A00023506

RECEIVED
15 NOV 24 AM 11:35

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ARISTOCRAT JEWELERS, INC.
DOCUMENT NUMBER: P14000091277

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID BERNDT
Name of Contact Person
ARISTOCRAT JEWELERS, INC.
Firm/ Company
411 N. Donnelly St. Ste 108
Address
MOUNT DORA FL 32757
City/ State and Zip Code
DCBerndt@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID BERNDT at (352) 735-2345
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|---|---|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

STOCRAT JEWELERS, INC 15 NOV 24 AM 5:54
(Name of Corporation as currently filed with the Florida Dept. of State)

P14000091277

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to
Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

411 N. Donnelly St.
Ste. 108
MOUNT DORA FL 32757

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

411 N. Donnelly St.
Ste 108
MOUNT DORA FL 32757

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

DAVID BERNDT
411 N. Donnelly St. Ste 108
(Florida street address)

New Registered Office Address:

MOUNT DORA, Florida 32757
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

Articles of Amendment
to
Articles of Incorporation
of

FILED

ARISTOCRAT JEWELERS, INC
(Name of Corporation as currently filed with the Florida Dept. of State)

15 NOV 24 AM 5:54

P14000091277

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

411 N. Donnelly St.
Ste. 108
MOUNT DORA FL 32757

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

411 N. Donnelly St.
Ste 108
MOUNT DORA FL 32757

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

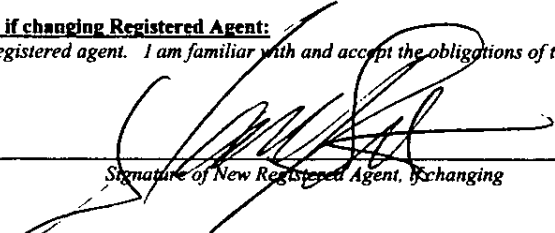
DAVID BERNDT
411 N. Donnelly St. Ste 108
(Florida street address)

New Registered Office Address:

MOUNT DORA, Florida 32757
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|-------|------------------|---|
| 1) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | PTDSV | DAVID BERNDT | 411 N. Donnelly St.
Suite 108
MOUNT DORA FL 32757 |
| 2) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | P | DANIEL DIVENANZO | 1737 LAKE TERRACE Dr.
EUSTIS FL 32726 |
| 3) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | ST | ANDREW DIVENANZO | 1737 LAKE TERRACE Dr.
EUSTIS FL 32757 |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

ARTICLE II, mailing address changed
to 411 N. Donnelly St. Ste 108, Mt. Dora 32757
ARTICLE V, REGISTERED AGENT changed
to DAVID BERNAT 411 N. Donnelly St.
Suite 108, Mt. DORA FL 32757

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

N/A

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment. If not contained in the amendment itself, (if not applicable, indicate N/A)

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
ARTICLE II, MAILING ADDRESS CHANGED
to 411 N. DONNELLY ST. STE 108, WFT. DORA 32757
ARTICLE V, REGISTERED AGENT CHANGED
to DAVID BERNDT 411 N. DONNELLY ST.
STE 108, WFT. DORA FL 32757

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 10/30/15
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/30/15

Signature _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DAVID BERNDT
(Typed or printed name of person signing)

President
(Title of person signing)