## P180000 98224

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(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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2019 JUL -9 AM 7: 56

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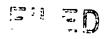
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	LOLA JEWEL	S INC		
PDOCUMENT NUMBER:	18000098224	ļ		
The enclosed Articles of Amen	dment and fee are sul	bmitted for filing.		
Please return all correspondenc	e concerning this mat	ter to the following:		
ALEJ.	ALEJANDRO VALIDO FUSTER			
LOLA	JEWELS INC	Name of Contact Person	1	
5705	W 20TH AVE, A	Firm/ Company PT 113		
HIALE	EAH, FL 33012	Address		
		City/ State and Zip Code	e	
	ELS@USA.COI 			
E-n	ail address: (to be us	ed for future annual report	notification)	
For further information concern	ing this matter, pleas	e call:		
ALEJANDRO VALIDO FUSTER		305	7809866	
Name of Contac	t Person		de & Daytime Telephone Number	
Enclosed is a check for the folk	owing amount made p	payable to the Florida Depa	artment of State:	
	13.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$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



LOLA JEWELS INC

2019 JUL - 9 AM 7:56

(Name (	of Corporation as current	ly filed with the Florida Dept. of State)
P18000098224		and the second s
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na N/A	me of the corporation:	
	ation "Corp," "Inc," or	
D. Enter new principal office address	if amuliantila.	N/A
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A
D. If amending the registered agent an		
new registered agent and/or the nev	V registered office address N/A	<u>s:</u>
Name of New Registered Agent	NI/A	
	N/A	
		reet address)
New Registered Office Address:	N/A	N/A . Florida
New Registered Office Futuress.		(City) (Zip Code)
		(chy) (za) code)
New Registered Agent's Signature, if cl		
hereby accept the appointment as regist	ered agent. I am famíliar	with and accept the obligations of the position.
	Signature of New 1	Panistarad Apant if changing
	Signature of New l	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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	VP	MARIA PILADE	8655 NW 98TH AVE
Add X Remove			DORAL, FL 33178
2) Change	VP	MAURIZIO ANDRE MANNINO	8655 NW 98TH AVE
Add			DORAL, FL 33178
Remove		N/A	
3) Change Add			
Remove			
4) Change		N/A 	
Add			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Domove			

ÌΑ	r adding additional A nal sheets, if necessar	y). (Be specific)			
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provisions for	ent provides for an er implementing the applicable, indicate N/A	mendment if not co	ation, or cancellat ntained in the amo	ion of issued shares endment itself:	<u>.</u>
<del></del>					
		<del></del>			

The date of each amendment(s) adopt date this document was signed.	on: N/A	, if other than the
N/	4	
Effective date <u>if applicable</u> :	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing nent of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes casent for approval.	t for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups.  I voting group entitled to vote separately on the	The following statement e amendment(s):
"The number of votes cast for t	he amendment(s) was/were sufficient for appro	val
by	(voting group)	"
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action	on and shareholder
Dated 07/06/28	14	
Signature	and,	
(By a direct selected, by	n, president or other officer — if directors or of an incorporator — if in the hands of a receiver, duciary by that fiduciary)	fficers have not been trustee, or other court
N	YIMIS TOSCA MARTINEZ	
· —	(Typed or printed name of person signif	ng)
PF	RESIDENT	
	(Title of person signing)	