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A RAMSEY DEC 17 2021

COVER LETTER

TO: Amendment Section Division of Corporation	S			
NAME OF CORPORATION	N: LAUR	a Tosato Iew	odry Collection 64023	Inc
DOCUMENT NUMBER: _	·	P190000	64 <u>023</u>	
The enclosed Articles of Am	endment and fee are su	bmitted for filing.		
Please return all corresponde	nce concerning this ma	tter to the following:		
	AURA Tosati 111 Bisca Miami,	Name of Contact Person	Mection Inc Apt # 815	
For further information conce			notification)	
_ Laura To	sato	at (857) 777 - 9130 de & Daytime Telephone Numb	
Name of Con	act Person	Area Co-	de & Daytime Telephone Numb	ет
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	lS43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing A. Amendmer			Address Iment Section	

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

FILED

to Articles of Incorporation

1	A	of		2021 DEC -2	AM II: 20
<u>LAURA</u>	705ATO	Jewelry	Collection d with the Florida De	Increase	
(<u>Name</u>	of Corporation	as currently file	d with the Florida De	ept. of State) HASSE	I. Fl Opin -
<i></i>	<u> 14 0000</u>	64023			
	(Documen	t Number of Cor	poration (if known)		<u> </u>
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida St	atutes, this <i>Flori</i>	da Profit Corporation	adopts the following	amendment(s) t
A. If amending name, enter the new n	ame of the corp	oration:			
name must be distinguishable and contain Inc.," or Co.," or the designation "(chartered," "professional association,	Corp." "Inc." o.	r "Co". A pro	uny," or "incorporated fessional corporation	I" or the abbreviation	The new "Corp.," the word
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>	if applicable:		11111 Bisco	syne Blod	
Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>icable:</u> OFFICE BOX		Miami, 1 IIII Bisca	TL 33/81 yne Blud	
		_	Apt # 815 Miami, Fi		
. If amending the registered agent an new registered agent and/or the new	d/or registered v registered offi	office address ir ce address:	Florida, enter the na	ame of the	
Name of New Registered Agent	LAUR	LA Too	ATO		
			Blud, Apt &	1 815, Miami	FL 33/1
New Registered Office Address:	11111 Bi	Slay 1 x (City)	Blvd 10 7 81	≤ . Florida <u>33/8</u> (Zip Cod	<u>[</u>

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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: X Change	<u>PT</u>	John Do).e			
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>ones</u>			
X Add	<u>sv</u>	Saily Sr	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name		Address	
1) Change	CEC	<u>)</u>	Amelia	MAliK		a Sea Blud
Add					sk 730	
Remove					coral Gable	FL 33134
2) Change		_				
Add						
Remove 3) Change		_				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change		_				
Add						
Remove						

Attach additional she	ets, if necessary).	. (Be specific)				
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f an amendment pro	ovides for an exc	hange, reclassif	ication, or cance	llation of issue	d shares	
provisions for imple	ementing the am	endment if not	contained in the	amendment its	elf:	
(if not applicable	z, indicate N/A)					
N/A	 .					·
	·		<u> </u>			
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	option:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendm	ent(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes east	or the amendment(s) was/were sufficient for approval	
by	,,	
v)	(voting group)	
selected	rector, president or other officer—if directors or officers have not be by an incorporator—if in the hands of a receiver, trustee, or other officers.	
арропц	ed fiduciary by that fiduciary) LAURA 405A40	
-	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	