119000097173

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

America 20/19



May 15, 2019

CHRISTOPHER T CASTLEMAN 6142 CARLTON AVE SARASOTA, FL 34231

SUBJECT: EVOKE CUSTOMS LLC Ref. Number: L19000097173

We have received your document for EVOKE CUSTOMS LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can not use owner as a title.

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.

Letter Number: 519A00009851

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

DO DOVI 2007 FILE 1 - 200

COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: EVDKe Customs LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHRISTOPHEIZ T Castleman
Evoke Customs LLL Firm/Company
6142 Carlton Address
Sarasota Fl 34231 City/State and Zip Code
E-mail address: (to be used for future annual aport notification)
For further information concerning this matter, please call:
CHRISTOPHER T Castlena at (941) 413 9833 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate Of Status Certificate Of Status & Certificate Opy (additional copy is enclosed) Certificate Of Status & Certificate Opy (additional copy is enclosed)

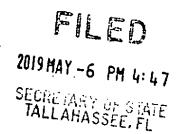
MAILING ADDRESS:

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Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Evoke Cos	stoms LLC
(<u>Name of the Limited Lial</u> (A Flor	pility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on $\frac{4/08/20/9}{2000}$ and assigned
Florida document number 190009	21.7 <i>3</i>
This amendment is submitted to amend the following	:
A. If amending name, enter the new name of the li	imited liability company here:
The new name must be distinguishable and contain the words "I	imited Liability Company," the designation "L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	a document number 1900091173 mendment is submitted to amend the following: amending name, enter the new name of the limited liability company here: we name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." new principal offices address, if applicable: sipal office address MUST BE A STREET ADDRESS) new mailing address, if applicable: ing address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new ered agent and/or the new registered office address here: Name of New Registered Agent:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
	City Zin 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	CHristophe Tatheren	GI42 Carlton Ave Sarasota F134231	Add
			☐ Remove
			☐ Change
			O Add
			☐ Remove
			□ Change
			□ Add
			Remove
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<u>ote:</u> If t	he date inserte	r than the da the date must be ed in this block te on the Depa	does not me	et the appli	cable statuto	ng or more that ry filing requi	(option 190 days after for rements, this	iling.) Pursuant t	to 605.020 e listed a

Signature of a member or authorized representative of a member

Typed or printed name of signee