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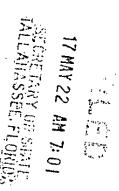
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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MAY 22 2017 J SHIVERS

Alberto J. Ibarra PA 3750 NW 87TH AVE STE 520 Doral, FL 33178

Registration Section

Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

COVER LETTER

	gistration Sec vision of Corp			
CUD WCT.		ORPION OUTDOOR GEAR	LLC .	
SUBJECT		Name of Limi	ted Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please retur	n ali correspor	ndence concerning this matter	to the following:	
		Alberto J Ibarra		
			Name of Person	nage and an angular groups of the state of t
		Alberto J Ibarra PA		
			Firm/Company	
		3750 NW 87TH AVE STE	. 520	
		agaliniiniiniiniiniiniiniiniiniiniiniiniini	Address	and and a second
		MIAMI FL 33178		
			City/State and Zip Code	V. W.
		INFO@BLACKSCORPIO		
		E-mail address: (to be used for future annual report notifi	ecation)
For further	information co	oncerning this matter, please co	nil:	
	Name of	F Person	at ()	Telephone Number
Enclosed is	a check for th	e following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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 Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLACK SCORPION OUTDOOR GEAR LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/09/2012 and assigned Florida document number L12000088881 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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.

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

If Changing Registered Agent, Signature of New Registered Agent

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Francisco Javier Tamargo Garcia-R	901 Brickell Key Blvd apt 1605	∃ Add
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more	(optional) than 90 days after filing.) Pursuant to	605.03
e: If the date inserted in this block does not meet the applicable statutory filing refunent's effective date on the Department of State's records.	equirements, this date will not be	nsieu
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record specifies a delayed effective date, but not an effective tim he 90th day after the record is filed.	e, at 12:01 a.m. on the ea	arlier
05/00/2017		
ed 05/09/2017		
K		
Signature of a member or authorized representative of a	a member	

Page 3 of 3

Filing Fee: \$25.00