L10000067845

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only/State/2/p/Filone #)
PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Se Division of Cor				
	E APPAREL LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ondence concerning this matter			
	LOVETTE DOBSON			
		Name of Person		
		Firm/Company		
	17350 STATE HWY 249	STE 220	2021 SEP 24	
		Address	24	
	HOUSTON, TX 77064		PN	M
	EFILE1234@INCFILE.CO	City/State and Zip Code M	PM 2: 12	رن ا
		to be used for future annual report noti		
For further information c	oncerning this matter, please c	all:		
LOVETTE DOBSON		888 462-3453 at ()		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for the	ne 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 Addres Registration S		Street Address: Registration Se	ction	
Division of Corporations		Division of Cor The Centre of T	porations	
P.O. Box 632 Tallahassee, l			e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RED APPLE APPAREL LLC	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan	<u>sears on our records.</u>) y)
The Articles of Organization for this Limited Liability Company were filed on	06/25/2010 and assigned
Florida document number L10000067845	
This amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company	here:
Antowan LaTarvis Byrd LLC	
he new name must be distinguishable and contain the words "Limited Liability Company," the	ne designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	23
	>C 2
	-5 F
Enter new mailing address, if applicable:	22
Mailing address MAY BE A POST OFFICE BOX)	20 P 11
	55 2
	- <u></u>
 If amending the registered agent and/or registered office address on our agent and/or the new registered office address here: 	r records, <u>enter the name of the new regis</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter I	Florida street address
	, Florida
City	Zip Code

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, 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
			□ Add
			□Change
			□ Add
			Remove 22 SE Changes
			24 PAdd D Remove
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				<u> </u>	~	
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be price: If the date inserted in this block does not meet the applument's effective date on the Department of State's record	or to date of licable statu	filing or more tl	(op nan 90 days af quirements, t	ter filing.)	Pursuan will not	at to 605.020 be listed a
cord specifies a delayed effective date, but not an effective s filed.				(b) The	: 90th d	ay after th
SEPTEMBER 20 , 2021 Antowan Signature of a member or aut ANTOWAN BYRD	 .					
Antowan Byrd	/ 					