Division of Corporations

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STUNTWEAR LLC

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Fox Rothschild LLP From: Lagana, Vanessa

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## **COVER LETTER**

TO: F	Registration Solvision of Co	ection rporations	· <b>!%</b> .	¥
SUBJECT	Г: 40.	STUN	TWEAR LLC	
		Name of Lit	nited Liability Company	
		Amendment and fec(s) are sul	-	
		VANESSA LAGANA		
			Name of Person	
			Firm/Company	
	Address			
MIAMI, FLORIDA 33131				
City/State and Zip Code  VLAGANA@FOXROTHSCHILD.COM  E-mail address: (to be used for future annual report notification)			SECRETIAY OF ALLAHASSEE.	
For further	information c	e-mail address: (	·	ncation)
VANESS.	A LAGANA		305 442-6544	ALE STE
	Name o	f Person	Area Code Daytime	· Telephone Number
Enclosed i	s a check for the	he 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)
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Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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2015-09-30 09:58:19 EDT

Fox Rothschild LLP From: Lagana, Vanessa

Fax Audit #H15000234384 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	STUNTWEAR LLC		
(Name of the	Limited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limite	* -	08/02/2010	and assigned
Florida document numberL1000008110	5		
This amendment is submitted to amend the	following:		
A. If amending name, <u>enter the new nan</u>	ne of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain	the words "Limited Liability Company," the de	signation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if ap	plicable:	<del></del>	
(Principal office address MUST BE A STI	REET ADDRESS)		
	<u> </u>		
		<u> </u>	<b>8 -</b>
Enter new mailing address, if applicable:		- A	25 ω <b>(</b>
Muiling address MAY BE A POST OFFI	CE BOX)	ָרָרָ רַרָּ	m C
			0=1 -22
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	and/or registered office address on doffice address here:		空至 切
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egistered agent and/or the new registere			空至 切
registered agent and/or the new registere  Name of New Registered Agent:	ed office address here:		空至 切
registered agent and/or the new registere  Name of New Registered Agent:	ed office address here:	our records, <u>ente</u>	空至 切

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 Changing Registered Agent, Signature of New Registered Agent

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Fax Audit #H15000234384 3 or removed from our records:

MGR≈ Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	LARS MONLIN, GLENELG LLC	365 BOSTON POST ROAD #244	
		SUDBURY MA 01776	Remove
		·	☐ Change
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