

Oct. 12, 2021 11:21 AM
10/12/21, 11:14 AM

Gray Robinson

Division of Corporations

File No. 13421 Fe 11/2

L11000047848

Florida Department of State
Division of Corporations
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((H21000380540 3)))



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ALL AMENDED
FLOKID

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GFSI CERTIFICATION LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

OCT 13 2021
A. LUNT

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GFSI CERTIFICATION, 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 April 22, 2011 and assigned

Florida document number L11000047848

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:

(Mailing 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

City, Florida Zip 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 Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	Melanie Penny	417 Heathrow Circle	<input checked="" type="checkbox"/> Add
		Rockledge, FL 32955	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jason Gates	4480 Newton Street	<input checked="" type="checkbox"/> Add
		Denver, CO 80211	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Robert T. Gates, Trustee of the	320 Le Juene Drive	<input checked="" type="checkbox"/> Add
	Robert T. Gates Rev. Trust	Merritt Island, FL 32953	<input type="checkbox"/> Remove
	dtd 06/19/17		<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 29, 2021

Robert J. Truett
Signature of a member or authorized representative of a member

Robert T. Gates Trustee of the Robert T. Gates Revocable Trust dated June 19, 2017

Typed or printed name of signee