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TALL AHASSES: FIRMS

J. BRYAN

NOV -1 2011

EXAMINER

COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO:	Registration S Division of Co					
SUBJE	·CT·					
30101		Name of Limi	ted Liability Company			
The en	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please	return all corresp	ondence concerning this matter	to the following:			
			Jesse Mitchell			
Outdo			Name of Person	製る		
			or Addict Apparel And Gear	300 72		
			Firm/Company	CT 31 PHID: 51		
1210 Hamilton Ave						

		C	Orange City, Fl 32763			
City/State and Zip Code						
		E-mail address: (to be used for future annual report notification	on)		
For fur	ther information	concerning this matter, please of	call:			
	je	esse mitchell	aı ()	6-7779		
	Name	of Person	Area Code & Daytime Tel	lephone Number		
Enclos	ed is a check for	the following amount:				
₽\$ 25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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		tration Section	STREET/COURIER Registration Section Division of Corporation			

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Outdoor a	addict apparel and gea	ar,LLC		
(Name of the Limited Lie	ability Company as it now appeared Limited Liability Company)	ers on our records.)		
(7.1.)	orida Eminica Endonity Company)			
The Articles of Organization for this Limited Liabi	ility Company were filed on	june 12011	and assigned	
Florida document number L1100006417	77		-	
			* 1	
This amendment is submitted to amend the following	ing.	. 12	100 mm	
rms amendment is submitted to amend the ronow	ing:		8 7	
A. If amending name, enter the new name of th	e limited liability company he	ere:	題ると	
			酸二四	
The new name must be distinguishable and end with the	ne words "Limited Liability Comp	pany," the designation "I	LC of the appreviation	
"L.L.C."			7.5	
Enter new principal offices address, if applicabl	e:			
(Principal office address MUST BE A STREET A	ADDRESS)		1,	

Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u></u>			
	 			
D. Maria Baraha at A. N. A. W.			L	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter t	ne name of the new	
· · · · · · · · · · · · · · · · · · ·				
Name of New Registered Agent:				
Name of New Registered Agent.				
New Registered Office Address:				
	Enter Florida street address . Flori da			
•	City		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 608, 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** Name' **Type of Action** <u>Address</u> **MGRM** Jamy Mitchell 1210 Hamilton Ave Orange City, FL 32763 Remove Jeffrey Rands MGRM 169 Old Park Way **☑** Add Lake Mary FL 32746 Remove $\prod Add$ Remove Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) October 8 2011 Dated ___ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00