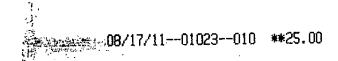
## L11000081227

(Re	equestor's Name)			
(Ad	ldress)			
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name	<del>)</del>		
(Do	ocument Number)			
Certified Copies	_ Certificates o	of Status		
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Office Use Only



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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

D. BRUCE
AUG 18 2011
EXAMINER

## **COVER LETTER**

TO: Registration Secutivision of Corp			
SUBJECT:	Idier APPA Name of Limi	REL ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Alex	Sm: 4h Name of Person	<u> </u>
	<u></u>	uldier Apparel Firm/Company	
	4520 Park	Lway Commerce B	lud.
	Orlando, F	City/State and Zip Code	11 AUG SECRE
	E-mail address: (1	Southerappearel. Co be used for future annual report notification	ASSE
For further information cor	ncerning this matter, please c	•	AUG 17 PM AUG LE D  CRETARY OF STATE AHASSEE, FLORID
Alex Sin Name of B	Person	at ( <u>407)</u> 42\ - 54 Area Code & Daytime To	12-1
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

Sould	ier Appare	.\	
( <u>Name of the Limited Liability</u> (A Florida )	Company as it now appears on Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability C	Company were filed on		_ and assigned
Florida document numberL\\00008\227	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company,"	the designation "LLC	" or the abbreviation
L.L.C.		28	
Enter new principal offices address, if applicable:		- GA	
(Principal office address MUST BE A STREET ADDR	RESS)	HC ZA	<u> </u>
		SSEY	
	•	100 J	3 111
Enter new mailing address, if applicable:		10.1 1.01	
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>	60
Imating dutiess MAT BE A FOST OFFICE BOAT			
B. If amending the registered agent and/or regist		records, enter the	name of the ne
registered agent and/or the new registered office add	ress here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	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

**Type of Action Title** <u>Name</u> <u>Address</u> □ Add Remove ☐ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated \_\_ Signature of a member or authorized representative of a member Alex Smith
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00