6/15/2021

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.

Account Number : I20040000167 Phone : (305)377-0809

Fax Number : (305)377-0781

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: corporate@pbyalaw.com

Secretary of SIME

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN B.O.A.T. ATTIRE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

JUN 1 6 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B.O.A.T. ATTIRE, LLC		
(Name of the Limited (A	Liability Company as it now appears on ou Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liab	ility Company were filed on 12/14/20	and assigned
Florida document number L11000140268		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
		1021
Enter new mailing address, if applicable:	·	1 3 5 T
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	PRI JUN 15 PH
		7.0
		新 克 5
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our eaddress here:	records, enter the name of the flew
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et 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 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

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
MGR	ANDREW LANE	16411 SW 77TH CT.	
		PALMETTO BAY, FL 33157	☐ Remove
			☐ Change
MGRM	LAMADRIZ, LLC	8205 SW 56TH STREET	
		MIAMI, FL 33155	■ Remove
			Change
MGR	JONATHAN H. JAY	8205 SW 56TH STREET	Add E
		MIAMI, FL 33155	Denange DAdd 15 PH 4: 59 DRemove STANGE
			□ Remove
			□ Change
			D Add
			☐ Remove
			□ Change
			Add
			□ Remove
			☐ Change

E. Effective date, if other than the date of filing:	
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the record specifies a delayed effective data, but not an effective black as to our answer.	as the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier.) The 90th day after the record is filed.	of:
Dated <u>JUNE 15</u> , <u>2021</u> .	
Signature of a member or authorized representative of a member	
RICARDO BAJANDAS, AUTHORIZED REPRESENTATIVE	

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Filing Fee: \$25.00