## L120000 93656

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## **COVER LETTER**

TO: Registration Sec -Division of Corp			
SUBJECT: Sov	ethbound A	po are LLC ed Liability Company	13 JUN 1
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	See Flow
Please return all correspon	dence concerning this matter	to the following:	S
	Robert	Name of Person	្តិ
	South	A A \	uc
	1806	E Cervates S-	+
	Pensacola	FL 3ZSO1 City/State and Zip Code	
	E-mail address: (to	Southbounday. Com	<b>)</b>
For further information co	ncerning this matter, please co	all:	
Robert h	Jes	at (850 ) 316 - 13	225
Name of	Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for the	e 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)

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

( <u>Name of the Limited Liability Co</u> (A Florida Lim	ited Liability Company)	່ດ: <b>ທ</b>
The Articles of Organization for this Limited Liability Com Florida document number <u>L1200009 36</u>		2012 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited  Southbound Ocean  The new name must be distinguishable and end with the words "L.L.C."	Apparel LL	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	Pensacola, F	Conzules St L 32501
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	d office address on our reco s here:	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flori	da 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			7+1 NNC
		SSCE. (\$1.00m)	Add -
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). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Dated	· ,
	Retol My (New 6/12/2013
	Signature of a member or authorized representative of a member
	Robert M Weis
	Typed or printed name of signee
	Page 2 of 2

Page 3 of 3

Filing Fee: \$25.00

13 JUNIU PH 4: 55