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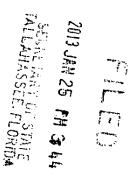
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COVER LETTER

TO: Regi

Registration Section
Division of Corporations

SUBJECT:

Agatic Clothing, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph R. Gosz

Name of Person

The Gosz Professional Ltd. Co.

Firm/Company

601 NE 22nd St., #43

Address

Miami, FL 33137

City/State and Zip Code

jrgosz@goszplc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph R. Gosz

___305 **505-634**(

Name of Person

Area Code & Daytime Telephone Number

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)

□\$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

Agatic Clothing, LLC (Name of the Limited Liabi	lity Company as it now appears on our records.) da Limited Liability Company))		
The Articles of Organization for this Limited Liability Florida document number L1300009059			and assig	jned
This amendment is submitted to amend the following	;;			
A. If amending name, enter the new name of the !	imited liability company here:			
Agiatic Clothing, LLC		ر، المشر	20	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designatio	n "LEC"		breviation
Enter new principal offices address, if applicable:		55	<u>eu</u>	<u>i</u>
(Principal office address MUST BE A STREET AD	DRESS)	<u>ग</u>		
•			12 (%)	<u>, , , , , , , , , , , , , , , , , , , </u>
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office a		er the r	name of	the new
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street	address	····· -	
	. Florida			
	City		ip 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M MGRM =	anager Managing Member		
Title ,	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remov
			Add
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			Remov
		 .	
		 	
			Remov
			
			Remov
		.	Add
			Remov

). If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
•	
Dated <u>J</u>	anuary 22 2013
	-la
	Signature of a member or authorized representative of a member
	Joseph R. Gosz
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00