L13000120853

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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2013 SEP -9 AM 8: 12

J. SAULSBERRY EXAMINER SEP 1.2, 2013

COVER LETTER

PO: Registration Se Division of Con				
SUBJECT:	Punk G	oods		
The state of the s	Name of Limit	ed Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Mari	Name of Person	0	
		Punk Goods Firm/Company	uc	
	273	N.W. 4184 Address		21
	<u> </u>	mi, FL 33127 City/State and Zip Code		2013 SEP -9
	E-mail address: (t	e be used for future and d report notification	ion)	-
For further information c	concerning this matter, please co		<u>32</u> 50	€: 12
Haring Name o	Laramo of Person	at <u>305)721 –755</u> Area Code & Daytime To	elephone Number	-
Enclosed is a check for t	he 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 St Certified Copy (additional copy	atus &

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

Punk	Goods	
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on nited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Con		27 - 2013 and assigned
Florida document number L 13000 \ 20853		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company."	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		· 2e 3
Principal office address MUST BE A STREET ADDRE.	<u> </u>	38 ····
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		The Control of the Co
B. If amending the registered agent and/or register registered agent and/or the new registered office addresses.		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
- production of the control of the c		, 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, 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 Address <u>Name</u> Harager Noelia F. Roman 273 N.W. 415t Miami, FL 33127 Remove Remove Remove Add Remove

Signature of a member or authorized representative of a member	<u> </u>	
Marine Coolana		
Marine Coolana	·	
Signature of a member or authorized representative of a member	N9-0	3-2013
Signature of a member or authorized representative of a member	09-0	03-2013
	09-0	Marine Coolana

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Filing Fee: \$25.00

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