Division of Corporations Electronic Filing Cover Sheet

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(((H13000264787 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

: AGI REGISTERED AGENTS

Account Number : 120000000205

Phone

: (305)416~6800

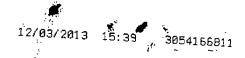
Fax Number

: (305)416~6811

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CG SPORTSWEAR, LLC

Certificate of Status	0
Certified Copy	
Page Count	02
Estimated Charge	03
Charge Charge	\$25.00



PAGE 02/05

COVER LETTER

(((H130002647873)))

TO:

Registration Section Division of Corporations

CS SPORTSWEAR, 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:

Diane M. Hernandez

Name of Person

Adams Gallinar, P.A.

Firm/Company

1000 Brickell Avenue, Suite 300

Address

Miami, Florida 33131

City/State and Zip Code

dhernandez@agilaw.com

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

For further information concerning this matter, please call:

Diane M. Hernandez

at (305)416-6800

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

Certified Copy
(additional copy is enclosed)

U\$60.00 Fifing 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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CG SPORTSWEAR, LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L13000160569	were filed on November 14, 2013 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
CG SPORTWEAR, LLC		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
	3 P 23	
	ASS T	
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
	0 i i	
	48 DA	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		
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

Page 1 of 3

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MGR = Manager

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:

MGRM = Managing Member				
Title	Name	Address	Type of Action	
			Add ·	
			Remove	
			Add	
			Remove	
			7 × 3	
			ANASSEE, FLORIDA	
			Remaye	
) 7: 48 4.TE JORIDA	
			Remove	
,				
			Add	
			Remove	
			Remove	

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D. If amending any other information, enter change(s) here: (Attach additional sheets,	(f necessary.)
Dated December 3 2013	
Radonf	
Signature of a member or authorized representative of a memb	
Robert R. Adams, Authorized Représentative	
Typed or printed name of signee	
Page 3 of 3	

Filing Fee: \$25.00