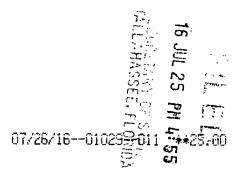
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## **COVER LETTER**

OUD IDOT				
SUBJECT		Name of Limit	ed Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please retur	n all correspor	ndence concerning this matter to	o the following:	
		MAHARAJ RAKESH		
Name of Person  UNIFORM EMPIRE, LLC.  Firm/Company  44 SE 14TH STREET #408  Address  BOCA RATON, FL 33432  City/State and Zip Code sushmarichardson@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  MAHARAJ RAKESH  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  Enclosed is a check for the following amount:  Securificate of Status  Certificate Copy (additional copy is enclosed)  Certificate Copy (additional copy is enclosed)				
			Firm/Company	
		44 SE 14TH STREET #408	3	
	Division of Corporations  UNIFORM EMPIRE, LLC.  Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for filing.  The return all correspondence concerning this matter to the following:  MAHARAJ RAKESH  Name of Person  UNIFORM EMPIRE, LLC.  Firm/Company  44 SE 14TH STREET #408  Address  BOCA RATON, FL 33432  City/State and Zip Code  sushmarichardson@gmail.com  E-mail address: (to be used for future annual report notification)  Further information concerning this matter, please call:  11ARAJ RAKESH  Name of Person  Area Code  Daytime Telephone Number  Total Copy  Certificate of Status  Certified Copy  Certified Copy  Certified Copy  Certified Copy  Certified Copy  Certified Copy  Certified Copy			
		BOCA RATON, FL 33432		
			·	
				cation)
For further	information co			cations
MAHARA	J RAKESH		561 939 9914	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	s a check for th	ne following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &

#### 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

UNIFORM EMPIRE, LLC.					
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears of Liability Company)	n our records.)		
The Articles of Organization for this Limited Lia Florida document number L15000052258	ability Company	were filed on $\frac{03/24}{}$	/2015	and as	signed
his amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here	:		
he new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the desig	gnation "LLC" or the	abbreviation "I	lC."
Enter new principal offices address, if applicable:		44 SE 14TH STRE	ET #408		
Principal office address MUST BE A STREET	(ADDRESS)	BOCA RATON, F	1 33432		
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE E	<u>30X)</u>			h-man,	
3. If amending the registered agent and/o	er registered of	ffice address on o	ur ragards anti-	AL AR	
egistered agent and/or the new registered off			ur records, <u>ence</u>	SECTION TO	Of the in
Name of New Registered Agent:	Jacob Monde			7.0	1 [] 
New Registered Office Address:	44 SE 14TH S			: <b>56</b>	<sup>م</sup> انين يا <sup>مه</sup>
	BOCA RATON		street address	22422	
	BOCK KATOR	City	, Florida	33432 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.

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = AMBR =	Manager Authorized Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Jacob Monde	44 SE 14TH STREET #408 BOCA	<b>■</b> Add
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E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date  Note: If the date inserted in this block does not meet the applicable sta document's effective date on the Department of State's records.	(optional) of filing or more than 90 days after filing.) Pursuant to 605.0	ලෝ ලෝ වා 207 (3)(b)
If the record specifies a delayed effective date, but not an e(b) The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlie	r of:
Dated 07/18 Jol6 Lates Rucharay Signature of a member or authorized r  CAKESH MAHARAJ		
- Autor of		
Signature of a member or authorized r	representative of a member	

Page 3 of 3

Filing Fee: \$25.00