LIGODIECO 42

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S. WARREN JUN 2 3 2017

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Minimum 40 Apparel LLC	ed Liability Company	
The enclosed Articles of Amendment and fee(s) are subn	nitted for filing.	
Please return all correspondence concerning this matter to	o the following:	
Brian	Name of Person	
Minimum	40 Apparl LL	C
2905 124th	Ase. E	
Parrish FL	34219 City/State and Zip Code	
Evanstrian 64 E-mail address: (to	be used for future annual re	port notification)
For further information concerning this matter, please cal		
Brian Evans Name of Person	at (<u>813</u>) Area Code	486-9986 Daytime Telephone Number
Enclosed is a check for the following amount:		
S25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy tadditional copy is enclosed.	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

Minimum 40 Appare	LLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L/L000180042</u> .	were filed on Scot. 27,2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Parrish Rint Shop LLC The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2905 124th Alse E.
(Principal office address MUST BE A STREET ADDRESS)	Parrish, FL 34219
Enter new mailing address, if applicable:	2905 124 th Ave. E. Parrish, FL 34219
(Mailing address MAY BE A POST OFFICE BOX)	Parrish, FL 34219
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	·
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as plaing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I any amiliar with and provided for in Chapter 605, F.S. Or it this document is

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
		· ·	☐ Remove
			Change
			☐ Remove
			☐ Change
			All Asset Department of the control
			Singe Name
			OS Remove
			☐ Change

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ated	June 20		2017					
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		Signature of a r	nember or authorize	ed representative of a	member	<u> </u>	JUN 22	
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		Bri	a Evans Typed or printed n			- Sin	22 PM 4: 10	FILED

Filing Fee: \$25.00