

L16000202687

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(Business Entity Name)

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OCT 02 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pickleboat Apparel 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:

Aleida Cabrera  
Name of Person

Pickleboat Apparel LLC  
Firm/Company

10524 Moss Park Rd. #204-651  
Address

Orlando FL 32832  
City/State and Zip Code

pickleboatapparel@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aleida Cabrera at (407) 844-6788  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Pickleboat Apparel LLC  
(Name of the Limited Liability Company as it now appears on  
(A Florida Limited Liability Company))

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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

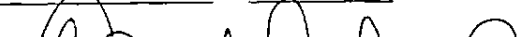
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Arian M. Martinez	10524 Moss Park Rd.	<input type="checkbox"/> Add
	Garcia	Orlando FL 32832	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Dated \_\_\_\_\_

  
Signature of a member or authorized representative of a member

Aleida Cabrera  
Typed or printed name of signee