L17000015043

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D. BRUCE AUG 08 2018

COVER LETTER

TO:	Registration S Division of Co						
SUBJEC	LEADFEA	ATHER OUTFITTERS, LLC					
SUBJEC		Name of Lim	ited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all corresp	ondence concerning this matter	to the following:				
		CLAYTON R. WALKER					
			Name of Person				
		LEADFEATHER OUTFI	TTERS, LLC				
			Firm/Company				
		11930 SW 55 STREET					
			Address				
		COOPER CITY, FL 333	330				٠
		clayton@raxwildlife.com	City/State and Zip Code		SECR	2016 A	•=7
For furth	er information (E-mail address: (concerning this matter, please concerning this matter)	to be used for future annual report notificall:	atron)	EFARY	2010 AUG - 1	
Clayton			954 253-6585		m⊖.		
	Name	of Person	Area Code Daytime T	Felephone Number	S IAIE LORIDA	3: £2	•
Enclosed	l is a check for t	the following amount:					
\$25.0	00 Filing Fee	☐ \$30.00 Fiting Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &		
	Regist Divisi P.O. B	JING ADDRESS: ration Section on of Corporations Box 6327 rassee, FL 32314	STREET/COURIEI Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on O1/19/2017 and assigned Florida document number L17000015043 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BESPOKE HUNTS LLC The new name must be distinguishable and contain the words "Limited Liability Company." the designation "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered office address on our records, enter the name of the negistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida Limited Liability Company. Only 19/2017 and assigned O1/19/2017 and assigned O1/19/20	LEADFEATHER OUTFITTERS, LLC		
Florida document number L17000015043 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BESPOKE HUNTS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered office address on our records, enter the name of the negistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)	
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Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	B. If amending the registered agent and/or registered office address bere-	ice address on our records, <u>enter tl</u>	se name of the new
New Registered Office Address: Enter Florida street address , Florida	e de la constant de l	•	
Enter Florida street address , Florida	Name of New Registered Agent:		
, Florida	New Registered Office Address:		
City Sip Code		Enter Florida street address	
City Zip Code		, Florida	
			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.

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 = N $AMBR = N$	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			☐ Remove
			□ Change
	4-1		Add
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			TACE OF THE PERSON OF THE PERS
			OAnnue
	· · · · · · · · · · · · · · · · · · ·		Depth No.
			Control of Remote
			□ Change
	** ** ** ** ** ** ** ** ** ** ** ** **	-	
			□ Remove
			□ Change

•	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	TACE STATE OF THE PROPERTY OF
	AUG
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	CORIO TO
(Han e <u>Note:</u>	tive date, if other than the date of filing:
f the re b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	July 30th 2018.
	Signature of a member or authorized representative of a member
	CLAYTON R. WALKER
	Typed or printed name of signee

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Filing Fee: \$25.00