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COVER LETTER

TO:	Registration Se Division of Cor			
CHEL	RSH Lette			
SUBJI	ЕСТ:		ited Liability Company	
		Amendment and fec(s) are sub	-	
Please	return all correspo	ndence concerning this matter	to the following:	
		Ayaz Nemat		
			Name of Person	
		RSH Lettercraft		
			Firm/Company	
		7436 47th Ave Cir E		
			Address	<u> </u>
		Bradenton, FL 34203		
		anemat@yahoo.com	City/State and Zip Code	·
		E-mail address: (to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please of	all:	
Ayaz	Nemat		941 323-6371	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
⊠ \$2	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida I	Company as it now appears on our r limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Co.	mpany were filed on 08/21/2017	and assigned
Florida document number L17000178741	<u>.</u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
RSH Leathercraft, L LC		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		\$3.00 <u></u>
Principal office address MUST BE A STREET ADDRE	<u></u>	&
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	,	5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.
		₹ # 5
. If amending the registered agent and/or registeregistered agent and/or the new registered office address Name of New Registered Agent:	red office address on our rec ss here:	ords, enter the name of the
New Registered Office Address:		
	Enter Florida street a	ddress
		, Florida
	City	, FIORIDA

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
A MB R	Aliya Nemat	7436 47th Ave Cir E. Bradenton FL 34203	Add
			
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flective date, if other than the date of filing: If the date inserted in this block does not meet the applianent's effective date on the Department of State's records	to date of filing or more than 90 days a able statutory filing requirements,	ptional) ifter filing.) Pu this date will	rsuant to not be
ecord specifies a delayed effective date, but no e 90th day after the record is filed.			the ea
September 12th d September 12th Signature of a member or aut	<u> </u>		
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Ham Venn			

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Filing Fee: \$25.00