

LIF0000 63284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

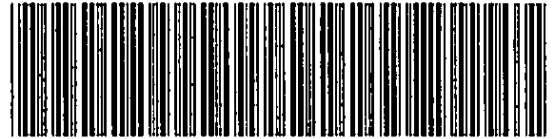
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/23/18--01018--019 **25.00

2018 MAY 24 AM 8:15
CLERK OF STATE
TALLAHASSEE, FLORIDA

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Missing Complete doc.
Leave envelope w/ pending
Rpt to name + address
on envelope.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 2, 2018

THE GENTLEMEN'S BRAND, LLC
14509 MAILER BLVD
ORLANDO, FL 32828

SUBJECT: THE GENTLEMEN'S BRAND, LLC

We have received your document for THE GENTLEMEN'S BRAND, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We have not received your complete application and there is no entity filed in this office under this company name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 618A00006573

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE GENTLEMEN'S BRAND, 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:

James C. Matthews

Name of Person

THE GENTLEMEN'S BRAND, LLC

Firm/Company

1405 Mailer Blvd

Address

1405 Mailer Blvd Orlando FL 32828

City/State and Zip Code

Thegentlemensbrand@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James C. Matthews

860 960-3144
at ()

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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

THE GENTLEMEN'S BRAND, LLC

(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 March 12, 2018 and assigned Florida document number L18000063284.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The Gentlemen's Brand, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

14509 Mailer Blvd
Orlando, Florida 32828

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14509 Mailer Blvd
Orlando, Florida 32828

FILED
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CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A (Remains the Same)

New Registered Office Address:

14509 Mailer Blvd Orlando, Florida 32828

Enter Florida street address

Orlando

City

Florida

32828

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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Gloria Matthews	14509 Mailer BlvdOrlando, Floric	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

FILED
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TALLAHASSEE, FLORIDA

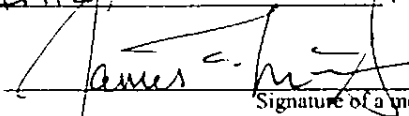
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated April 22nd 2018



Signature of a member or authorized representative of a member

James C. Matthews

Typed or printed name of signee