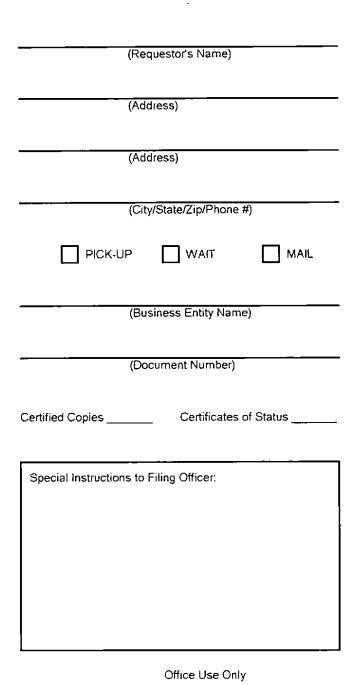
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St. State Market

COVER LETTER

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TO:	Registration Sec Division of Corp				် ကို
SUBJE	СТ:	Exude Name of Limi	Wear L.L.C.		574. 57.
The end	losed Articles of /	Amendment and fee(s) are sub-	mitted for filing.		· A-
Diagra	enture all angrapas	idence concerning this matter	to the following:		
i icasc i	cturii aii correspor	dente concesting this matter	/ // \\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.		
		Fara	Name of Person		
		Fv	-	L. L. C.	
		لهبها المراجعة المراج	Firm/Company		
		59.	57 Fish Court		
			Orlando, FZ. 32	807.	
			Gity/State and Zip Code	10m	
For furt	her_information co	ncerning this matter, please ca	to be used for future annual report notif	ication)	
	Farah	U. Virella	at (407) 494.	7700	
	Name of	Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check for the	e following amount:			
₩ S25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 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

ARTIC	CLES OF ORGANIZATION	
	OF	37
Exic	Le Y Weur L.L.C.	21.36
(Name of the Limited)	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	* . P
The Articles of Organization for this Limited Lia	bility Company were filed on3/20/20/9	and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the	abbreviation "11C."
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/o registered agent and/or the new registered offi	r registered office address on our records, ente	r the name of the nev
Name of New Registered Agent:	Foruh M. Virella	
New Registered Office Address:	5957 Fish Court Enter Florida street address	
	Orlando Florida	32807 Zin 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>	Name	Address	Type of Action
Founder/	Farah W. Yirella	5957 Fish Court. Delando Fi. 32807	[\$\overline{\sqrt{Q}}\) Add
(2		Delando, Fi. 32807	🗆 Remove
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			🗆 Add
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			Change
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in effective o ote: If the	late is listed, the date inserted i	han the date of date must be spe in this block do non the Departm	cific and can es not meet	not be prior the applic	to date of fil able statuto	201 ing or mo ry filing	re than 90 day	(optional) ys after filing.) ts, this date	Pursuant to 60: will not be list	5.020° ted as
record s The 90th	specifies a c day after t	delayed effec the record is	ctive date filed.	e, but no	t an effe	ctive tii	me, at 12	:01 a.m. (on the earli	er o
ited	April .			2019	7	1 /	//)			
					' <i>V</i>	0/				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00