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(Rec	questor's Name)	
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COVER LETTER

то:	Registration Sect Division of Corpo			
	Evan Michae	el Apparel LLC		
SUBJ	ECT:	Nama of Limit	ted Liability Company	
		Name of Land	ed manny company	
The er	nclosed Articles of A	mendment and fee(s) are subm	nitted for filing.	
Pleasc	return all correspond	dence concerning this matter t	o the following:	
		Evan Musa		
			Name of Person	
		Evan Michael Apparel & L	.Ç	
			Firm/Company	
		923 ne 24th st		
			Address	
		Boca Raton FL, 33431		
		Evanmusa2@gmail.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notif	ication)
For fu	orther information co	ncerning this matter, please ca	il:	
	Evan	Musa	561 926-2742 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclo	sed is a check for the	following amount:		
≡ \$	25.00 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Evan Michael Apparel LLC		2020 MAT -6 1	Pii 3: ne
(<u>Name of the Limite</u>	d Liability Company as it now app A Florida Limited Liability Compan	v)	
The Articles of Organization for this Limited Lia Liorida document number	ability Company were filed on	* 1	and assigned
his amendment is submitted to amend the follo	wing:		
a. If amending name, enter the new name of	the limited liability company	here:	
Evan M. Musa Enterprises, LLC			
he new name must be distinguishable and contain the we	ords "Limited Liability Company," th	e designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applica Principal office address MUST BE A STREET			
nter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE E	<u></u>		
3. If amending the registered agent and/or regent and/or the new registered office address		r records, <u>enter the 1</u>	name of the new register
Name of New Registered Agent:	Evan Musa		
New Registered Office Address:	923 Ne 24th St		
	Enter 1	Florida street address	
	boca raton	, Florida	33431 a
	City		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.

f 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 = Ma $AMBR = Au$	anager uthorized Member			
<u>Title</u> MGR	<u>Name</u> Kelli Musa	Address	2020 May -6 PH 3: 06	Type of Action
	Nem Musu	<u> </u>		□Add
		923 NE 24	FH ST, Boca Raton FL, 33431	= Remove
				□Change
				□Add
				🗆 Remove
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Effective date, if other if an effective date is listed. Note: If the date inserted document's effective date.	the date must be specifed in this block does	c and cannot be prior to one of the capplicable of	date of filing or more than	(optional) 90 days after filing.) Purs ements, this date will	uant to 605.0207 (not be listed as t
e record specifies a dela ed is filed.	yed effective date, bu	t not an effective time	, at 12:01 a.m. on the e	arlier of: (b) The 90t	h day after the
Dated Muy	14th Mar	2020 Musa			
-	Signature	of a member of authoriz	ed representative of a med L name of signee		