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COVER LETTER

	Registration S Division of Co			
SUBJEC	CUDA CL	OTHING LLC		
SOBJEX		Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		TOBIAS, KURTIS C		
		-	Name of Person	
		CUDA CLOTHING LLC		
			Name of Limited Liability Company endment and fee(s) are submitted for filing. nee concerning this matter to the following: TOBIAS, KURTIS C Name of Person CUDA CLOTHING LLC Firm/Company 4320 COMMONS DRIVE W APT 2304 Address DESTIN, FL 32541 City/State and Zip Code ctobias2@liberty.edu E-mail address: (to be used for future annual report notification) erning this matter, please call: son at (703	
		4320 COMMONS DRIVE	I W APT 2304	
			Address	
		DESTIN, FL 32541		
			City/State and Zip Code	
		ketobias2@liberty.edu	to be used for future annual remort notific	ication
For furth	er information (·	Katon,
		concerning this matter, preuse ea		
TOBIAS, KURTIS C		210	at ()	
	Name (of Person	Area Code Daytime	Telephone Number
Enclosed	is a check for t	he following amount:		
■ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
		JNG ADDRESS:	STREET/COURING Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CUDA CLOTHING LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on 08/05/2019	and assigned
Florida document number 1.19000198468		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	(5
TOBIAS APPAREL LLC		2019 TA
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LLC" or	the abbreviation ELC.
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD.	RESS)	
		
		49
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		.,
B. If amending the registered agent and/or regi	istored office address on our records.	antar the name of the ne
registered agent and/or the new registered office add		neer the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flori	da
	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.

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			Remove
			Change
			Add
			Remove
			☐ Change
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Dated V. A. Taking				ot an effective tim	e, at 12:01 a.m. on th	ne earlier o
Signature of a member or authorized representative of a member	10/28 Dated _		. 2019	·		
		Luci	A Notice	horized representative of	a member	

Page 3 of 3

Filing Fee: \$25.00