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## **COVER LETTER**

Division of C	Section Corporations		
JAWZ .	Apparel L.L.C.		
SUBJECT:			
	Name of L	imited Liability Company	
The enclosed Articles	of Amendment and fee(s) are si	ubmitted for filing.	
Please return all corres	spondence concerning this matte	er to the following:	
	Jeffrey Heim		
		Name of Person	
	JAWZ Apparel L.L.C.		
		Firm/Company	7020 SEP 25
	3107 West Van Buren D	rive	SEP SEP
		Address	
	Tampa, FL 33611		
	h.jeffrey6@gmail.com	City/State and Zip Code	
	E-mail address:	(to be used for future annual report not	ilication)
For further information	concerning this matter, please of	catl:	
Jeffrey Heim	, , , , , , , , , , , , , , , , , , , ,	404 514-9973	
	20	at ()	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
<b>■ \$25.00</b> Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fec. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Seconition of Corporation of The Centre of T 2415 N. Monroe	porations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAWZ Apparel L.L.C. (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 August 27, 2020 and assigned Florida document number \_\_\_\_\_1.20000266995 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SHRKco LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member			
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be pre- if the date inserted in this block does not meet the appument's effective date on the Department of State's record	ior to date of filing or more than 90 days after filing.) Pursuant to 605.0 licable statutory filing requirements, this date will not be listed
ord specifies a delayed effective date, but not an effective filed.	e time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
September 21 2020	
Allan Dista	·
	thorized representative of a member