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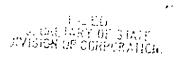
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COVER LETTER

	legistration Sec Division of Corp							
elin inch		Outfitters LLC				•	•	
SUBJECT	ı: <u></u>	Name of Lin	nited Liabili	ty Company				
The enclos	sed Articles of A	Amendment and fee(s) are sub	omitted for	filing.				
Please retu	ım all correspoi	ndence concerning this matter	to the follo	owing:				
		Clifford Lavalla						
			Nam	ne of Person				
		The Closet Outfitters LLC	,					
			Fim	n/Company				
		1500 Beville Rd 600-324	4					
				Address	-			
		Daytona Beach FL 32114						
		autovision2020@gmail.com	-	e and Zip Co	de			
		E-mail address: (to be used for	or future ann	ual report not	ification)		
For further	information co	neerning this matter, please co	all;					
Clifford La	avalla		at (303-7515	or I	386 - 53	0-3988
Name of Person			Area Code	Daytin	ne Telephor	ne Number		
Enclosed is	s a check for the	: following amount:						
■ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Cer	00 Filing Fe tified Copy itional copy is			Certified C	of Status &
R D P.	ailing Address egistration So ivision of Co O. Box 6327 allahassee, F	ection prporations		Regis Divis The (2415	Address: stration Se tion of Cor Centre of T N. Monro hassee, FL	rporation Fallahass e Street,	ee)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 APR -2 PH 2: 47

The Closet Outfitters LLC

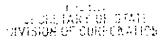
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Comp	any were filed on March 01 20	21 and assigned
Florida document number L21000099788		
This amendment is submitted to amend the following:		
(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		
The new name must be distinguishable and contain the words "Limited L	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	<u> </u>	- · · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
rew registered office Address.	Enter Florida street a	address
		, Florida Zip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my dutie as provided for in Chapter (es, and I am familiar with and 605. F.S. Or, if this document is

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 21 APR -2 PA 2: 47	Type of Action
AMBR	Clifford George Lavalla 111	1500 Beville Rd 600-324 Daytona Beach, Fl 32114	≣Add
			□ Remove
			_ □Change
			□Add
			□Remove
			□Change
			□Add
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cument's effective	e date on the Depa	rtment of Stat	e's records.	,			.c will like t	e nated a
ecord specifies a	delayed effective d	ate, but not an	effective tin	ne. at 12:01 a.	m. on the earli	er of: (b)	Che 9Ωth day	coffee the
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