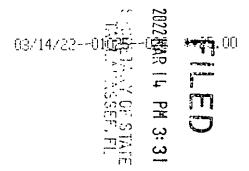
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COVER LETTER

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SUBJECT	ISLAND	GIRL BEACH GEAR			
	•	Name of Li	imited Liability Company		tatus &
The enclose	ed Articles o	f Amendment and fee(s) are su	ubmitted for filing.		
		ondence concerning this matte			
		DAWNITA FRY			
			Name of Person		
		ISLAND GIRL BEACH	GEAR		
			Firm/Company		
		4853 ABACO DRIVE		2027	
			Address	211	7,
		TAVARES FLORIDA 32	2778	2022/MAR 14 S. ZGK.E.J.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
		dawnitafry@outlook.com	City/State and Zip Code	07 STAI	
		E-mail address:	(to be used for future annual report notificatio	n) ==	
For further in	nformation c	oncerning this matter, please c	call:	г: -	
Dawnita Fry		_	407 5343147		
	Name o	f Person		phone Number	_
Enclosed is a	check for th	ne following amount:			
≘ \$ 25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & (Certified Copy (additional copy is enclosed)	S60.00 Filing F. Certificate of S Certified Copy (additional copy is	Status &
	ing Address		Street Address:		
Divi	ision of Co	orporations	Registration Section Division of Corporati	ions	
_	Box 6327		The Centre of Tallah		
Lall	ahassee, F	L 32314	2415 N. Monroe Stre	et Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ISLAND GIRL BEACH GEAR 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 Company were filed on 04/05/2021 and assigned Florida document number L21000158176 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ISLAND GIRL GEAR LLC The new name must be distinguishable and contain the words "Limited 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) 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 , Florida

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 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

Title	Name	<u>Address</u>	Type of Action
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			□Remove
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Signature of a memberior au	uthorized represe	ntative of a memb	er		