LZ1000 294515

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SECRETARY OF STATE
TALLABASSE STATE

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor					
	etwear LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Felix J Perez				
	 	Name of Person	<u></u>		
	Naked Streetwear				
		Firm/Company			
	4743 sw 51st				
		Address			
	davie fl 33314				
		City/State and Zip Code	_		
	felicityamber20@gmail.com	n to be used for future annual re	nort notification)		
For further information c	oncerning this matter, please co		port notification,		
felicity a perez		9546 at ()	255452		
Name o	f Person	Area Code	Daytime Telephone N	Number	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed.	Ce sed) Ce	0.00 Filing Fee, entificate of Status & entified Copy Iduional copy is enclosed)	
Mailing Addres		Street Add			
Registration S Division of C		-	ion Section of Corporations		
P.O. Box 632		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Naked Streetwear			
(Name of the Limi	ted Liability Company as (A Florida Limited Liabil	it now appears on our records.) ity Company)	
ne Articles of Organization for this Limited Lorida document number L21000294515	iability Company were	e filed on June 25, 2021	and assigned
is amendment is submitted to amend the fol	lowing:		
If amending name, enter the new name of	of the limited liability	company here:	
e new name must be distinguishable and contain the	words "Limited Liability Co	ompany," the designation "LLC" or	the abbreylation "L.L.C."
ter new principal offices address, if appli	cable:		
rincipal office address MUST BE A STRE	ET ADDRESS)		D-2"
			## 12 (Files
			#유 클 #
iter new mailing address, if applicable:			57 J
ailing address MAY BE A POST OFFICE	BOX)		产益 <u>№</u>
	_		
If amending the registered agent and/or	registered office addr	ess on our records, <u>enter the</u>	e name of the new register
ent and/or the new registered office addre	ess here:		
Name of New Registered Agent:	Felicity A Perez		
New Registered Office Address:	4743 sw 51st		
	•	Enter Florida street address	
	Davie	. Floric	da <u>33314</u>
	-	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 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>	<u>Name</u>	Address	Type of Action
MGR	Felicity A Perez	4743 sw 51st Davie FL 33314	■Add
			□Remove
			□Change
AMBR	Felix J Perez	4743 sw 51st Davie FL 33314	□Add
			□Remove
			■ Change
			SEC
			SECRITARY DE LA LIAMASSIE
			THE PANCE
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change



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