K21 000425204

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D PRINCE

· . · . COVER LETTER

Division of Cor	porations			
DEVINE S	PORTSWEAR LLC			,
OUBJECT:	Name of Lunit	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.		
Please return all correspo	ndence concerning this matter t	to the following:		
	Devon Mellul			
		Name of Person		
	DEVINESPORTSWEAR I	.LC		
		Firm/Company		
	6605 Hermosa Beach Lane			
		Address		
	Delray Beach, Fi 33446			
		City/State and Zip Code		
	devon.mellul@gmail.com			
		to be used for future annual report notific	.ation)	. ~ ?
For further information of	oncerning this matter, please ca	all:		- 1
Devon Mellul		561 3064114 at ()		;
Name (of Person	Area Code Daytime	Telephone Number	 ;
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclused)	☐ \$60.00 Filing F Certificate of S Certified Copy (additional copy i	Fee. Status &
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Sec	tion	

Registration Section
Division of Corporations

Registration Section

TO:

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT. + TO ARTICLES OF ORGANIZATION OF

DEVINE SPORTSWEAR LLC		
(Name of the Limited Liability Comp. (A Florida Limited	inv as it now appears on our records Liability Company)	,)
he Articles of Organization for this Limited Liability Company	were filed on September 27th, 20	D21 and assigned
orida document number L21000425204		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
EVINESPORTSWEAR LLC		
te new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	6605 Hermosa Beach Lane	
rincipal office address MUST BE A STREET ADDRESS)	Delray Beach, FL 33446	2::
		- ;
nter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		1 1
If amending the registered agent and/or registered office a ent and/or the new registered office address here:	nddress on our records, <u>enter tl</u>	ne name of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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>	Name	Address	Type of Action
			🗆 Add
			□Remove
			□ Change
			🗆 Add
			□ Remove
			□Change
			🗀 Add
			□Remove
			Change
·			•
		-	Add Remove □ Change
			. □ Change
<u>.</u>			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change

Typed or printed name of signce