L2200013485

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03/25/24--01024--003 **25.00

1/8/20 Ex

SECRETARY OF STATE

COVER LETTER

	Registration Sec Division of Corp			
SUBJEC	CT: <u>Old School I</u>	Iot Rods Apparel LLC		
	Name of Limite	d Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
			Donna Mosser	
			Name of Person	
			Old School Hot Rods Apparel LLC	
			Firm/Company	
			9905 Casey Drive	
			Address	
			New Port Richey, FL 34654	
			City/State and Zip Code	
			otrods30@gmail.com	
			to be used for future annual report notification)	
For furth	er information co	oncerning this matter, please c	alt:	
	Donna	Mosser	at (727) 808 - 879 l	
	Name of	Person	Area Code Daytime Telephone Number	
		6.19		
_		e following amount:		
\$25.0	00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status		- 1
	Mailing Address			CHARLEST CHARLEST
	Registration S		Registration Section Division of Corporations	1
	Division of Co		Division of Corporations	
	P.O. Box 632' Tallahassee, F		The Centre of Tallahassee	
	rananassee, r	10 JEJ 17	Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Old School Hots Rods Apparel LL			
(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on o lability Company)	our records.)	
The Articles of Organization for this Limited Liability Company	were filed on <u>01/26</u>	5/22	and
assigned Florida document number <u>L22000063485</u>			
This amendment is submitted to amend the following: Name of co	ompany		
A. If amending name, enter the new name of the limited liabi	lity company here: C	Old School Hot Rods Apparel	
<u>LLC</u>			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designa	tion "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)		1-	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our record	is, <u>enter the name of the new</u>	registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida str	eet address	
		, Florida Zip Code	
	City		
		ა 🗠	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agre		2024 t SECT TAL	

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>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
			🗆 Remove
			□Change
			□ Add
			SELL APPLASSEE
			PHOT STATE ORemove
			□Change

	<u> </u>
and the same of th	(optional) days after filing.) Pursuant to 605.020
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