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COVER LETTER

TO: Registration Section Division of Corporat	ions		
SUBJECT: Birdie	Solf Harriel	110	•
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of Amen	dment and fee(s) are sub	omitted for filing.	
Please return all correspondence	e concerning this matter	to the following:	
	Tris	Name of Person	
~		Name of Person Golf Apparel, LLC Firm/Company	
		2nd Ave Address	
	_	Beach/FL 33700 City/State and Zip Code	Q
. —	E-mail address: (unn 240 gmz. 1. com to be used for future annual report notifi	cation)
For further information concern	ing this matter, please c	all:	C
Trisha Dun Name of Person		at (316) 680-9 Area Code Daytine	2 \ 7 Telephone Number
Enclosed is a check for the follo	owing amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	_	Street Address:	ti am
Registration Section		Registration Sec	

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Birdie Go	of Apparel, LL	C
(Name of the Limited Lia (A Flo	bility Company as it now appride Limited Liability Compan	y)
The Articles of Organization for this Limited Liabilit		7/25/22 and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l		
Rhett Bradley, LLC The new name must be distinguishable and contain the words "	Limited Liability Company," th	ne designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	A+17A	Swint Peter Beach, FL 33706
(Principal office address MUST BE A STREET AD	DRESS)	Durnt Hete Beach, FL 35706
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	 	Same as above
B. If amending the registered agent and/or registered agent and/or the new registered office address her		r records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	VIA	
New Registered Office Address:	Enter I	Torida street address
		Florida
_	City	, Florida 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
		·	□Remove
			□Change
			□ Add
			□Remove
			☐ Change
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			ПРСПЮУС
			□Change
· 			
			□ Remюve
			□ Change

ed 1-8-23, 1:35,pm.					
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