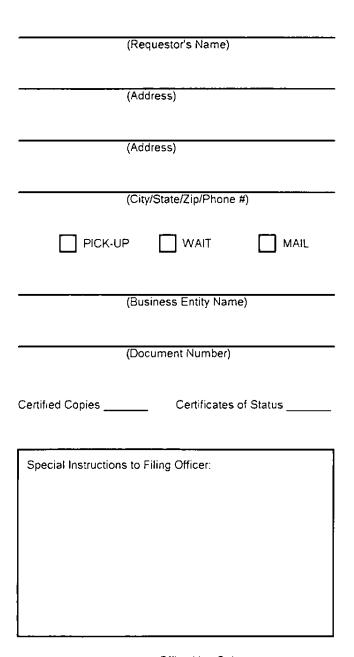
## L23 0000 214892



Office Use Only



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## COVER LETTER

TO: Registration Se Division of Cor					
SUPLECT BD	SS WEAR LLC	_			
SUBJECT: DU	Name of Lim	ited Liability Company	<del></del>		
<b></b>					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Er	nest Lewis			
		Name of Person			
		Firm/Company			
	16/1 Grov	Address			
	Clearn	City/State and Zip Code	) 		
	F	City/State and Zip Code	,		
	Erricst (20 E-mail address: (	to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c				
Ernesi	+ Lewis	at ( <u>362</u> ) <u>789 -</u> Area Code Daytin	7400		
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	ne following amount:				
12 \$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 Addres		Street Address:	vetion		
Registration S Division of C		Registration Se Division of Co			
P.O. Box 632	7	The Centre of	The Centre of Tallahassee		
Tallahassee, I	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KUSS WEARLLC	
BOSS WEAR LLC (Name of the Limited Liability Company as it now appears on or (A Florida Limited Liability Company)	ır records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{\sqrt{Janua}}{L^{23000044892}}$ .	erry 24, 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Lewis Lane ILC  The new name must be distinguishable and contain the words "Limited Liability Company," the designate	
The new name must be distinguishable and contain the words "Limited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	202!
• • •	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	F
······································	
B. If amending the registered agent and/or registered office address on our record agent and/or the new registered office address here:	s, enter the name of the new registered
Name of New Registered Agent:	
N B 1 107 AH	
New Registered Office Address:  Enter Florida stre	vet 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 capac	its. I fouther arrea to complessith the
provisions of all statutes relative to the proper and complete performance of my duaccept the obligations of my position as registered agent as provided for in Chapte being filed to merely reflect a change in the registered office address. I hereby con	uies, and I am familiar with and er 605, F.S. Or, if this document is

company has been notified in writing of this change.

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
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ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.05  ore: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occurrent's effective date on the Department of State's records.  record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed.  ated  Signature of a member or authorized representative of a member							
ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.00 ofte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occument's effective date on the Department of State's records.  record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after this filed.							
ffective date, if other than the date of filing:  (optional)  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0:  office: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ocument's effective date on the Department of State's records.  record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.	•		7 1 -				<del></del>
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signature of a memori of authorized representative of a memori		/hmm	me ller	y or authorized and	proportation of a man	abur	<del></del>
Tammie Lawis Typed or printed name of signee							
/ ALTELEVITE   1/ (A.1/ \)		1 11 12	m10 /1/1	. ) / 🤇			

Filing Fee: \$25.00