L23000199794

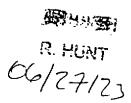
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COVER LETTER

TO:

Registration Section Division of Corporations

Rane Vlo SUBJECT:	gs Enterprise LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing		
Please return all corresp	pondence concerning this matter	to the following:		
	Rafael Quinones			
		Name of Person		
	<u>Limited</u> Lis	Ability Company Firm/Company		
	3500 Prosner Blvd #1196			~;
		Address		_ +!
	Davenport FL, 33837			. : 27
		City/State and Zip Code	<u>у</u> УС	-o [*
	info@simpleraneclothing.c		[1](V)	
	E-mail address: (to be used for future annual report not	fication)	PM 4: 19
For further information	concerning this matter, please c	all:	F7)	Ψ
Rafael Quinones		347 830-5229 at ()		
Name	of Person		ie Telephone Number	_
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing I Certificate of Certified Copy (additional copy i	Status &
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Coo The Centre of 1	rporations	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Compa A Florida Limited	ny as it now appears on Liability Company)	our records.)
The Articles of Organization for this Limited Listorida document number L23000199794	ability Company	were filed on April 2	4, 2023 and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
SIMPLE RANE CLOTHING LLC			
he new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	N/A	F-23
(Principal office address MUST BE A STREE	T ADDRESS)		
			TL (1997년 - 1997년 - 1
Enter new mailing address, if applicable:	N/A SS P TT		
(Mailing address MAY BE A POST OFFICE BOX)			
Mailing address MAY BE A POST OFFICE I	<u>80X)</u>		E. S.
Mailing address MAY BE A POST OFFICE I	<u>80X)</u>		• • • • • • • • • • • • • • • • • • • •
3. If amending the registered agent and/or re	egistered office :	address on our recor	FL 19
3. If amending the registered agent and/or registered office addressing the new registered office addressing the Name of New Registered Agent:	egistered office : s here:	address on our recor	FL 19
3. If amending the registered agent and/or re igent and/or the new registered office addres	egistered office : s here:	address on our recor	ds, enter the name of the new registe
3. If amending the registered agent and/or registered office addressing the new registered office addressing the Name of New Registered Agent:	egistered office : s here:	Enter Florida s	ds, enter the name of the new registe

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
		ASSET ST	Change Add Remove Change
		A A A	Change
			🗆 Add
			□Remove
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			🗆 Ađđ
			□Remove
			□Change

I'm looking to change my LLC name from Rane Vlogs Ente		pie Kane Cioun	ng LLC		
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06/23/2023					
effective date, if other than the date of filing:	date of filing or mor	opt (opt e than 90 days afte	i onal) r filing.) P	ursuant t	o 605.0:
If the date inserted in this block does not meet the applicable.					
iment's effective date on the Department of State's records.					
ord specifies a delayed effective date, but not an effective tim filed.	ie, at 12:01 a.m. on	the earlier of: (b) The	90th day	after t
А					
d	_ ·				
Signature of a member or authori	ized representative o	a member		· · · ·	-

Filing Fee: \$25.00