

L24000376215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

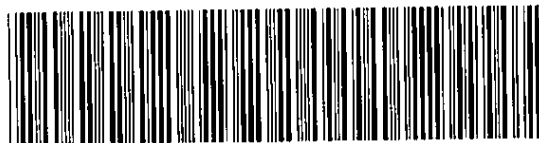
(Document Number)

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For Use by the Filing Office

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Judah Clothing LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ronald L. Hamilton Sr

\_\_\_\_\_  
Name of Person

Judah Clothing

\_\_\_\_\_  
Firm/Company

2430 Cedarecrest Place

\_\_\_\_\_  
Address

Valrico Florida 33596

\_\_\_\_\_  
City/State and Zip Code

judahclothing144@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronald L. Hamilton Sr.

813 478-8822

\_\_\_\_\_  
Name of Person

at ( )

Area Code

Daytime 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)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Judah Clothing

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/27/2024 and assigned  
Florida document number L24000376215

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Ronald L Hamilton RLH

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2430 Cedarcrest Place

Valrico Florida 333596

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2430 Cedarcrest Place

Valrico Florida 333596

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Ronald L Hamilton Sr	2430 Cedarcrest Place	<input checked="" type="checkbox"/> Add
		Valrico Florida 33596	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ronald L Hamilton Jr	2430 Cedarcrest Place	<input type="checkbox"/> Add
		Valrico Florida 33596	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Barbara J Hamilton	2430 Cedarcrest Place	<input type="checkbox"/> Add
		Valrico Florida 33596	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If 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 605.0207 (3)(b)

If the 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 record is filed.

Barbara J. Hamilton  
Signature of a member or authorized representative of a member

Typed or printed name of signee