L25000006938

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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09/03/25--01633--005 **25.00

COVER LETTER

TO:	Registration S Division of Co			
OUD ID		n Imports LLC		
SUBJE	UI:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all corresp	ondence concerning this matter	to the following:	
		Banessa Alvarez		
			Name of Person	
		Swyft Filings		
			Firm√Company	
		1814 N Memorial Way		
		·	Address	
		Houston, TX 77007		
			City/State and Zip Code	
		filings@swyftfilings.com		
		E-mail address: (to be used for future annual report no	tilication)
For furth	ner information (concerning this matter, please c	all:	
Baness	a Alvarez		877 777-0450	
	Name (of Person	Area Code Daytii	me Telephone Number
Enclose	d is a check for t	he 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 Addre Registration		Street Address: Registration S	ection
	Division of C	Corporations	Division of Co	orporations
	P.O. Box 63: Tallahassee,		The Centre of 2415 N. Monr.	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Thre	ee Lion Imports LLC		ŕ
(Name of the Limited Liab (A Flor	oility Company as it now appears ida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	01/03/2025	and assigned
Florida document numberL25000006938			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company her	<u>e</u> :	
Three Lions Imports LLC			
The new name must be distinguishable and contain the words "L	imited Liability Company," the de-	ignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	<u> </u>		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BQX)			
B. If amending the registered agent and/or register	nad affina addrage on our ray	ands antar the nam	o of the new registers
B. It amending the registered agent and/or register agent and/or the n <u>ew registered office address here</u>		corus, <u>enter the nam</u>	e of the new registere
agent and of the new registered office address nere	; '		
Name of New Registered Agent:			
New Registered Office Address:			
Ten registere office ridates.	Enter Florio	la street address	
		Ulanida	
		, Florida	Zin 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title Name Address Type of Action

<u>Title</u>	<u>Name</u>	Address	Type of Action
		-	□Add
			□Remove
			☐ Change
			☐Change
			□Add
			□Remove
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ffective date, if other than the date of filing:				<u>.</u>	- 	
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Signature of a member or authorized representative of a member		17.	,			
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		Signatu	e of a member or authoriza	ed representative of a r	nember	
			Typed or printed n	-ma of signan		

Filing Fee: \$25.00