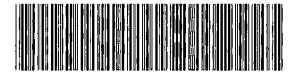
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: DOCUMENT NUMBER: P22000062428 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LORIEN H. JONES Name of Contact Person TATENO OUTFITTERS ING PARALLEL 31 Apparel, inc 15301 CASS DR Address **PUNTA GORDA FL 33982** City/ State and Zip Code LatLngOutfittersInc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239) 218-9457

Area Code & Daytime Telephone Number LORIEN JONES Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of

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ATRIAT	111	1=3	ı=i	N

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P22000062.4	128 :01
	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
LATENG OUTFITTERS, INC.	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co"" "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp.," 4 professional corporation name must contain the word
B. Enter new principal office address, if applicable:	15301 CASS DR
(Principal office address MUST BE A STREET ADDRESS)	PUNTA GORDA FL 33982
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15301 CASS DR
	PUNTA GORDA FL 33982
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
	
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent.—I am familiar	i:
r neren, accept the appointment as registered agent. I am jamittar	who total accept the consignions of the position.
Signature of New F	Registered Agent, if changing
	6 1717 6 6
Cheat if applicable	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith. SV as an Add.

X Change	PT	John Do	<u>oe</u>			
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	nlA		
X Add	<u>sv</u>	Sally Sr	nith	1117		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s	•
1) Change		_				
Add						
Remove						
2) Change		_				
Add						
Remove 3) Change						
Add						
Remove					<u> </u>	
4) Change		_				
Add						
Remove						
5) Change						
Add						•
Remove						
6) Change						,, <u></u>
Add				·· -		
Remove						

(Attach additional sheets.	idditional Articles, ente if necessary) (Be spe	cific)		
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. If an amendment provi	ides for an exchange, re	eclassification, or ca	ncellation of issued s	nares,
provisions for implem (if not applicable.	ienting the amen <u>dment</u>	if not contained in t	the amendment itself	
	macaic way			
hia				_
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The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval by LORIEN AND BRANDON JONES (voting group) O3/20/2024 Dated (By a director, president or obserptificer—Vi directors or officers have not be selected, by an incorporator—if if the hands of a receiver, trustee, or other	•
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(By a director, president or observofficer—vif directors or officers have not be selected, by an incorporator—if in the hands of a receiver, trustee, or other	
appointed fiductury by that fiduciary)	en ourt
LORIEN JONES	
(Typed or printed name of person signing)	
PRES	



April 22, 2024

LORIEN H, JONES 15301 CASS DR PUNTA GORDA, FL 33982

SUBJECT: PARALLEL 31 APPAREL, INC.

Ref. Number: P22000062428

We have received your document for PARALLEL 31 APPAREL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by this name.

We have the entity Parallel 31 Apparel, Inc. in our system.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 624A00008748

5/17

AHN: ANISSA BUTGER,

Ammenoment Have been made,
please ut me know if anything additional
is needed. Thankyou for your help \$ time
Sincelly,
www.sunbiz.org Lower Mass.