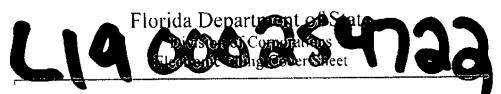
18886118813



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To:

Page: 1 of 4

Division of Corporations

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 Fax Number : (845)818-3588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

To: 18506176383 *

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BARUCH DISTRIBUTORS, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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Electronic Filing Menu Corporate Filing Menu

Help

Frem: Veorp Services, LLC

Page: 2 of 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

BARUCH DISTRIBUTORS,LLC	•	
(Name of the Limited Liability Company as it (A Florida Limited Liability	t now appears on our records.) y Company)	
The Articles of Organization for this Limited Liability Company were	filed on 10/09/2019	and assigned
1 19000254722		
lorida document number L19000254722		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of	ompany here:	
BARUCH DISTRIBUTORS (FL) LLC		
he new name must be distinguishable and contain the words "Limited Liability Con	mpany," the designation "LLC" o	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		0.2
Principal office address MUST BE A STREET ADDRESS)		TAIL TAIL
Timeput office dualess siest be a situation state.		JAN
		
		SS: A
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
	<u> </u>	
3. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records,	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	EnterFloridastreet address	
	, Flor	rida ZipCode
	Ciry	Tint out

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

From: Vcorp Services, LLC 18886118813

To: 18506176383

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>	Name	Address	Type of Action		
			Add		
			☐ Remove		
			Change		
			Add		
			☐ Remove		
			☐ Change		
			☐ Remove		
			Change		
			Remove		
			Change		
			Add		
			□ Remove		
			Change		
			□ Remove		
			Change		

18506176383	Page, 4 of 4	2021-01-07 16:40:27 GMT	18886118813	From: Vcorp Services, LLC
D. If am	ending any other information	n, enter change(s) here: (Attach addi	tional sheets, if necessary.)	
				
				
				<u> </u>
				
E Effo	ative data if other than the d	ate of filing:	(optional)	
Note	effective date is listed, the date must be: If the date inserted in this blocument's effective date on the Dep	ate of filing: e specific and cannot be prior to date of filing of the does not meet the applicable statutory fourtment of State's records	rmore than 90 days after filing.) Pur illing requirements, this date wil	suant to 605,0207 (3)(b) I not be listed as the
(h) Tl	he 90th day after the reco	effective date, but not an effectiv rd is filed.		the earlier of:
Date	January 6th			
		Jose was a fall		
	<u></u>	ignature of a member or authorized representa	tive of a member	
	Taylor Lolya			
	-	Typed or printed name of signo	ev.	

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