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10:	Division of Cor		•	•	'			
		CRIDIC	TRIBUTION AND SER	OVICÉS I I C	45			
SUBJE	CT:		ited Liability Company	CVICES LLC		-		
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please 1	return all correspo	ndence concerning this matter	to the following:					
			Sonia Becerra Name of Person			_		
			Name of Person					
			Swyft Filings Firm/Company			_		
				170				
			3 Greenway Plaza #13 Address			_		
			Houston, TX 77046			 	20	
			City/State and Zip Code	_	_		۔ ال 21	Œ
		r il -li	filings@swyftfilings.cor		م "	<u>××</u>	₩ .	
Ear furt	than information o	n-mail address: (report notificatio	n)	300 000	2021 JUN 16 AH 10: 2	A.
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	Sonia Be		at (<u>877</u>)	777-0450	1	<u> </u>	: 20	
	Name o	f Person	Area Code	Daytime Tele	phone Numi	oer		
Enclose	ed is a check for th	ne following amount:						
% \$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end		Certifi	Filing Fe cate of St ed Copy nal copy is	tatus &	
	Mailing Addres Registration S		Street A Registr	ddress: ation Section				
	Division of C		Divisio	n of Corpora	tions			
	P.O. Box 632			ntre of Tallah . Monroe Str		9 10		
	Tailahassee, I	L 32314		issee, FL 323	-	010		

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

CBJ DISTRIBUTION AND SERVICES LLC

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

ATIC	cida chimed islability Company (20
The Articles of Organization for this Limited Liabilit	y Company were filed on	04/07/2021	and assigned
Florida document number	·		
This amendment is submitted to amend the following	::		
A. If amending name, enter the new name of the l	imited liability company her	<u>re</u> :	
The new name must be distinguishable and contain the words	Limited Liability Company," the des	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	1 ee 11		
B. If amending the registered agent and/or registe agent and/or the new registered office address her		cords, <u>enter the nar</u>	ne of the new register
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			
New Registered Office Address.	Enter Floria	da street address	
		, Florida	

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>	Address	Type of Action
AMBR	BRYSON C JOHNSON	6493 SW 74TH DRIVE	
		GAINESVILLE, FL 32608	
			□Change
			□Add
		 	□Remove
			Change
			□Remove
			□Change
	14 H. C. L. C.		□Add
			□ Remove
			□Change
			□Add
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Effectiv	e date, if other than the date of filing:
f an effec Note: 1	tive 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 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
docume	nt's effective date on the Department of State's records.
	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
e record	
	d.
rd is file	
rd is file	
rd is file	24.0
rd is file	May 13. 2021
rd is file	

Filing Fee: \$25.00