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(Requestor's Name)	_
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COVER LETTER

TO: Registration Section

Divi	sion of Cor	porations	*	•
eun incyp.	Russell Dis	tribution LLC	No.	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter	_	
r lease return	an correspo	indence concerning this matter	to the following.	
		Jason Russell		
			Name of Person	
			Firm/Company	
		4319 Unbriddled Song Dri	ive	
			Address	
		Ruskin, FL 33573		
		-	City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For further in	formation c	oncerning this matter, please c	all:	
Jason Russel	1		at (§ 1,3) 57	4-9011
	Name o	f Person		ne Telephone Number
Enclosed is a	check for th	ne following amount:		
\$25.00 F	iling Fec	☐ \$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)
	ling Addres		<u>Street Address:</u> Registration Se	ection
-	gistration S ision of C	orporations	Division of Co	
P.O	. Box 632	7	The Centre of	Γallahassee
Tall	lahassee, F	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Russell Distribution LLC (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 4/12/2021 and assigned Florida document number L21000169099 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 City

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>	Address	Type of Action
AMBR	Jason Russell	4319 Unbriddled Song Drive	≣ Add
		Ruskin, FL 33573	□Remove
			Change
			□Add
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n effective date is te: If the date cument's effect ecord specifies is filed.	a delayed effective d					he 90th day at	
te: If the date cument's effect ecord specifies a is filed.	a delayed effective d					he 90th day at	