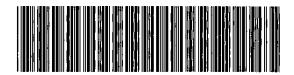
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Special Instructions to	Filing Officer:			
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SECRETARY OF STATE

T. CLINE MAY - 6 2008

**EXAMINER** 

## COVER LETTER

TO: Registration Section Division of Corpo					
SUBJECT: D & B Dist	ributors, LLC				
SOBJECT.		nited Liability Company)			
The enclosed Articles of Articles return all correspond	mendment and fee(s) are sub lence concerning this matter	_			
	Ruggieri D. Bellido	O (Name of Person)			
		(Name of Person)			
	D & B Distributors,	LLC (Firm/Company)			
	6620 NW 38th Terr	ace	· .		
		(Address)			
	Virginia Gardens, F				
		(City/State and Zip Code)		200 TAL	
For further information con	cerning this matter, please of	call:		2008 HAY SECRET	
Ruggieri D. Bellido		at (786 ) 267-1491		TARY DIASSEE.	1
(Name of	Person)	(Area Code & Daytime	Felephone Number)	PM 12: 56 FE. FLORIDI	
Enclosed is a check for the	following amount:			Signal Si	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Registrati	G ADDRESS: ion Section of Corporations 6327	STREET/COURIER Registration Section Division of Corporati Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

St. 2 42 4 2 1 1 1 283

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D & B DISTRIBUTORS, LLC				
( <u>Name of the Limited L</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	ai ÷		
The Articles of Organization for this Limited Liab	oility Company were filed on <u>04/22/2008</u>	and assigned		
Florida document number <u>L08000040212</u>				
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability company here:			
"L.L.C."	the words "Limited Liability Company," the designation registered office address on our records, enter	2006 SEI		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter</u> ce address here:	therdame of the new		
Name of New Registered Agent:		5 PHIZ:		
		156 156		
New Registered Office Address:	(Enter Florida street address)			
	, Florida			
	(City)	(Zip 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> **Name Address** RUGGIERI D. BELLIDO **6620 NW 38 TERRACE** MGR **√** Add VIRGINIA GARDENS, FL 33166 Remove Add MARTA COLLAZO 6620nNW 38TH TERRACE MGRM VIRGINIA GARDENS, FL 33166 Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. April 24th Signature of a metabet or authorized representative of a member Bellido Rucalean Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00