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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **GRAND DISTRIBUTION, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK KATSMAN, ESQ.

Name of Person

The Katsman Law Firm, P.A.

Firm/Company

3363 NE 163rd St, Suite 509

Address

North Miami Beach, FL 33160

City/State and Zip Code

mark@katsmanlaw.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Katsman, Esq.

Name of Person

305 405-4545

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$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)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED
TALLAHASSEE, FLORIDA

13 OCT 24 AM 11:39

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

GRAND 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 08/11/2008 and assigned
Florida document number L08000077143.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with 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)

1201 NE 191 STREET, Suite 404

North Miami Beach, FL 33179

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

1201 NE 191 STREET, Suite 404

Enter Florida street address

North Miami Beach

City

, Florida 33179

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

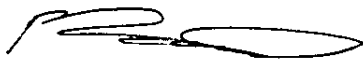
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Vladimir Riauzov	3140 S. OCEAN DR., # 1907	☐ Add
		HALLANDALE BEACH, FL 33009	☒ Remove
MGRM	Gregorii Sarkissov	1201 NE 191 STREET, Suite 404	☒ Add
		North Miami Beach, FL 33179	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____



Signature of a member or authorized representative of a member

VLADIMIR RIAZOV

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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13 OCT 24 AM 10:39
STATE OF FLORIDA
TALLAHASSEE