

LO 9000064114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

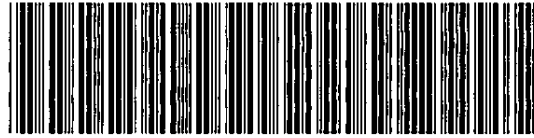
(Document Number)

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DIVISION OF CORPORATIONS  
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B. KOHR

OCT - 2 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Supreme 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:

Matthew P. Collins

Name of Person

Firm/Company

PO Box 191062

Address

Atlanta, Georgia 31119

City/State and Zip Code

matt@mpcollins.com

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

For further information concerning this matter, please call:

Matthew P. Collins

Name of Person

at ( 404 )

214-6070

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

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and assigned

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

Page 1 of 2

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

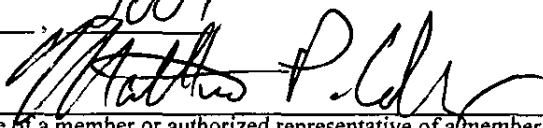
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Kevin Dash	328 Euclid Avenue	<input checked="" type="checkbox"/> Add
		105	<input type="checkbox"/> Remove
		Miami Beach, FL 33139	
MGR	Larby Amirouche	600 Lincoln Road	<input type="checkbox"/> Add
		2nd floor	<input checked="" type="checkbox"/> Remove
		Miami Beach Florida 33139	
MGRM	Evelyn Canonizado	600 Lincoln Road	<input type="checkbox"/> Add
		2nd Floor	<input checked="" type="checkbox"/> Remove
		Miami Beach Florida 33139	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated

September 24, 2009



Signature of a member or authorized representative of a member

Matthew P. Collins

Typed or printed name of signee