

LD9000074036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

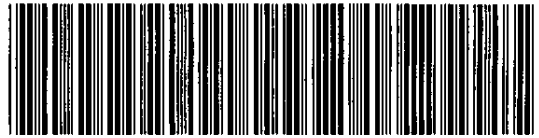
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD,

AUG 20 2009

EXAMINER



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08/18/09--01012--010 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 AUG 18 AM 5:40

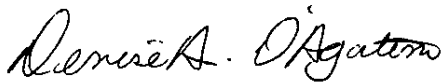
Florida Department of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern,

Enclosed please find the completed form to change the registered agents name and address for Southeastern Component Sales.

If you need to contact me please call #215-534-2665. For a return address you may use:
4255 Erica Dr, Doylestown, PA 18902.

Best Regards,

A handwritten signature in cursive script, reading "Denise A. D'Agostino".

Denise A. D'Agostino

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Southeastern Component Sales 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:

Denise A. D'Agostino
Name of Person

Firm/Company

4255 Erica Drive
Address

Doylestown, PA 18902
City/State and Zip Code

denise.d@ampsales.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise A. D'Agostino at (**215**) **534-2665**
Name of Person 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

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

Southeastern Component Sales 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 August 3, 2009 and assigned
Florida document number L09000074036.

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 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)

415 S. Grand Ave.

Deland, FL 32720

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

415 S. Grand Ave.

Deland, FL 32720

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:

Scott Shepherd

New Registered Office Address:

415 S. Grand Ave.

Enter Florida street address

Deland

City

Florida

32720

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.

Scott Shepherd
(Signature)
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:

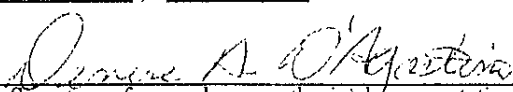
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Scott Shepherd	415 S. Grand Ave. Deland, FL 32720	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Brian S. Jacobsen	820 Jacaranda Dr. Oldsmar, FL 34677	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<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 August 12, 2009



Signature of a member or authorized representative of a member

Denise A. D'Agostino

Typed or printed name of signee