

L09000107512

(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



800185777698

RECEIVED
10 SEP 30 AM 10:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
10 SEP 30 PM 2:35
SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. KOHR

SEP 30 2010

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 524630 7733961
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 SEP 30 PM 2:35

ORDER DATE : September 28, 2010
ORDER TIME : 4:48 PM
ORDER NO. : 524630-010
CUSTOMER NO: 7733961

DOMESTIC AMENDMENT FILING

NAME: FH DISTRIBUTION, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER'S INITIALS: _____

FH DISTRIBUTION, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 SEP 30 PM 2 35
signed

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

Title	Name	Address	Type of Action
MGRM	Whitney B Gibbs	5555 north ocean boulevard # 21 Fort lauderdale, FL 33308 U.S.A	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 9/29, 2010.

BJORN ERIK HANSEN

Signature of a member or authorized representative of a member

BJORN ERIK HANSEN, MEMBER

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00