40000117071

(Re-	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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11 AUG 23 AM 11: 57

SECRETARY OF STATE
SECR

f- 20-11

TO WHOM IT MAY CONGERN:

ENCLOSED IS A LLC NAME CHANGE REQUEST.

AS PER YOUR INSTRUCTIONS, BEWW IS MY NAME, ADDRESS

AND CONTACT PHONE NUMBER.

NICHOLAS SYRIS 18700 CASSANDRA PT. CN BOCA RATON, FL 33496

TEZ: 56.1-487-9800

COVER LETTER

TO:	Registration S Division of Co			
SUBJI	ect: Ll		SORY DISTRIBUTION CO., I ted Liability Company	_LC
		f Amendment and fee(s) are sub	-	
Please	return all corresp	ondence concerning this matter	to the following:	
			Nicholas S. Syris	
			Name of Person	
			Firm/Company	
		1870	00 Cassandra Pointe Ln.	<u> </u>
			Address	
			Boca Raton, FL 33496	
		nev	City/State and Zip Code ris@lavida-havana.com	
		E-mail address: (t	o be used for future annual report notifica	tion)
For fu	rther information	concerning this matter, please c	all:	
		as S. Syris of Person	at (201) 777-0103 Area Code & Daytime 7	elephone Number
Enclos	ed is a check for t	the following amount:		
\$25	5.00 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)
		NG APPRICA		

MAILING ADDRESS:

TO:

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

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11 AUG 23 AM 11:57

LH HUMIDOR & ACCESSORY DISTRIBUTION CO., LLSECRETARY OF STATE (Name of the Limited Liability Company as it now appears on our records) AHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Compar	ny were filed on .	November 9, 2010	and assigned
Florida document number <u>L10000117071</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ibility company	here:	
LH DISTRIBUTION, LLC			
The new name must be distinguishable and end with the words "Lir"L.L.C."	nited Liability Co	mpany," the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		on our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street addre	ess
		, Florida	
	City	,,	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>		
I hereby accept the appointment as registered agent and agent the provisions of all statutes relative to the proper and con accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officeompany has been notified in writing of this change.	aplete performa is provided for it	nce of my duties, and I an n Chapter 608, F.S. Or, ij	n familiar with and f this document is

Page 1 of 2

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 **Address** <u>Title</u> <u>Name</u> ☐ Add Remove Remove Remove $\prod Add$ Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 20 2011 Dated ___ Signature of a member or authorized representative of a member Nicholas S. Syris Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00