

L12000052750

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 09 2014
D. FOLICE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **CEC Wholesale 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:

Rana H. Ibrahim

Name of Person

Rana Convenience Inc.

Firm/Company

359 Porto Alegre Street

Address

Punta Gorda, FL 33983

City/State and Zip Code

Ribrahim1214@gmail.com

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

For further information concerning this matter, please call:

Rana H. Ibrahim

Name of Person

at (**941**)

Area Code

249-2112

Daytime Telephone Number

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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**

CEC Wholesale 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 4/18/12 and assigned
Florida document number L12000052750.

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)

2000 N. Washington Blvd.

Sarasota, FL 34234

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

359 Porto Alegre Street

Punta Gorda, FL 33983

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CLERK OF DISTRICT COURT
PUNTA GORDA, FLORIDA

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: Rana H. Ibrahim

New Registered Office Address: 359 Porto Alegre Street

Enter Florida street address

Punta Gorda, Florida 33983

City

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 605, 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.

Rana H. Ibrahim
If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Khalid Ratil	3419 38th St. S.W.	<input type="checkbox"/> Add
		Lehigh Acres FL 33976	<input checked="" type="checkbox"/> Remove
AMBR	Rana H. Ibrahim	359 Porto Alegre Street	<input checked="" type="checkbox"/> Add
		Punta Gorda, FL 33983	<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

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

Khalid Ratil hereby relinquishes any and all interest he may have in
CEC Wholesale, LLC, including, but not limited to, any interest he may
have as a manager, member, managing member, or authorized
member.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated

1/3/14



Signature of a member or authorized representative of a member



KHALED RATIL

Typed or printed name of signee

Rana Ibrahim

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Filing Fee: \$25.00

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TALLAHASSEE FLORIDA