# Liz00010L785

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## **COVER LETTER**

	Registration Se Division of Cor		,	
SUBJEC		FASTENERS DIRECT, LLC		
SUBJEC	-1: <u> </u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		BRIAN ELLEGARD		
		<del></del>	Name of Person	
		WIEBEL, HENNELS & C	ARUFE, PLLC	
			Firm/Company	
		9420 BONITA BEACH R	OAD, SUITE 200	
			Address	
		BONITA SPRINGS, FL 3	4135	
			City/State and Zip Code	
		BELLEGARD@WHC-CPA		
		E-mail address: (	to be used for future annual report notifi	cation)
For furth	er information c	oncerning this matter, please ca	all:	
BRIAN	ELLEGARD		239 992-6211 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	ne 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 Fec, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

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

FLORIDA FASTENERS DIRECT, LLC		a anna and a N
(Name of the Limited Liability (A Florida)	Limited Liability Company)	r records.)
	ompany were filed on 08/17/201	2 and assigned
This amendment is submitted to amend the following:	<b>-</b>	
Florida document number L12000106485  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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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)		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	******	
(Principal office address MUST BE A STREET ADDRI	<u></u>	was spell
		55. 6
Enter new mailing address, if applicable:		SS N
(Mailing address MAY BE A POST OFFICE BOX)		
		Common Common
	<del></del>	Zu PRII
		records, enter the name of the nev
registered agent and/or the new registered office addre	ess here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
		, Florida
	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	EDWARD PITHER	535 TERRACINA WAY	Add
		NAPLES, FL 34119	Remove
			□ Change
			_ □ Add
			☐ Remove
			☐ Change
<u></u>			Add
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ective date, if other than the date of filing:	(optional)	
ective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to date of filing or more te: If the date inserted in this block does not meet the applicable statutory filing r	e than 90 days after filing.) Pursuant to 60 requirements, this date will not be list	05.020 sted a:
cument's effective date on the Department of State's records.	- <b>-</b>	
record specifies a delayed effective date, but not an effective tin The 90th day after the record is filed.	ne, at 12:01 a.m. on the ear	lier d
MARCH 17 2016		
The state of the s		

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Typed or printed name of signee

Filing Fee: \$25.00