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COVER LETTER 🧬

	ration Section on of Corporat	ions			
SUBJECT:	THE	WHOLESALE	NETWORK OF	FLORIDA L	LC.
		Name of Limi	ted Liability Company		
The enclosed A	rticles of Amen	dment and fee(s) are subr	mitted for filing.		
Please return al	l correspondenc	e concerning this matter t	to the following:		
		AMAN	KHAN		
	_		Name of Person	·	
		THE WHOLES	SALE NETWORK O	F FLORIDA	
			Firm/Company		
		9160 PINN 4	ACLE CIRCLE		
			Address		
		WINDERMERE	FL, 34786		SP 18 P
	_		City/State and Zip Code		一% 5
			F & GMAIL. COI		OF STATE
For further info	rmation concer	ning this matter, please ca	·	· · · · · · · · · · · · · · · · · · ·	52 Sinina
	AMAN K	HAN	at (321)	102 - 935 Daytime Telephone N	
	Name of Perso	on	Area Code	Daytime Telephone N	umber
Enclosed is a ch	heck for the foll	owing amount:			
\$25.00 Filin	ng Fee 🗀	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cer (sed) Cer	00 Filing Fee, tificate of Status & tified Copy itional 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

THE WHOLESALE NETWORK OF FLORIDA DOCUMENT H (15000026420)

Name of the Limited Liability Company as it now appears on our records

(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

A. Ownership Percentages

Please update the ownership percentages.

Jorge Flores 75%

Aman Khan 25%

Effective Date:

Dated, 09-08-2015

Signature of Registered Agent

Printed Name of Signed

Aman Khan