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J. HARRIS

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	CT:	Indie Do	TO Supply LLC	· 
		The Corporations  Indic Doto Supply LLC  Name of Limited Liability Company  ticles of Amendment and fee(s) are submitted for filing.  correspondence concerning this matter to the following:  Francisco Quintero Name of Person  Firm/Company  16938 Knights bridge Ln Address  Delray Beach, FL 33484  City/State and Zip Code  FL Quintero Le gmail. (un  E-mail address: (to be used for future annual report nonfication)  mation concerning this matter, please call:  Co Quintero at (S61) 289-4/17  Name of Person  Area Code Daytime Telephone Number		
The end	losed Articles of A	amendment and fee(s) are subm	itted for filing.	
Please 1	eturn all correspon	dence concerning this matter to	the following:	
		Francisco	Quintero	
			Name of Person	
			Firm/Company	<del></del> -
			rim/Company	
		16938 Knig	htsbridge Ln	
			Address	
		Delras Beach	5. FL 33484	
		<del></del>	City/State and Zip Code	
		FL Quinter	o 1@gmail. com	
	•	E-mail address: (to	be used for future annual report notifi-	cation)
For furt	her information co	ncerning this matter, please call	l:	
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+10	ancisco	Quintero	at ( <u>\$61</u> ) 289-5	// <del>7 -</del>
	Name of	rerson	Area Code Dayume	relephone Number
		•		
Enclose	d 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

Indie Dojo Su	rely LLC	
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears or Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	06/02/2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the desig	- N
Enter new principal offices address, if applicable:		AV:
(Principal office address MUST BE A STREET ADDRESS)		AHASA -
Enter new mailing address, if applicable:		PR PR IS O
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on ou <u>re</u> :	r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Address</u> Type of Action <u>Title</u> **Name** Juan P Chumaceiro 4475 N Meridian Ave ☐ Add Miami Beach, FL 33140 Remove ☐ Change □ Add ☐ Remove \_□ Change \_□ Add □ Remove \_□ Change \_ Add □ Remove ☐ Change SEE C. Change ☐ Remove

☐ Change

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