

U7000146336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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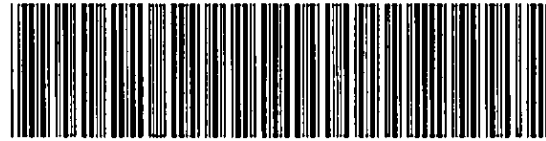
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

O. SIMMONS

AUG 01 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MATERIALS, SUPPLIES & PARTS SOLUTIONS 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:

MARIA ELENA SEMIDEY

Name of Person

MEDINA LEGAL SUPPORT

Firm/Company

3105 NW 107th AVE SUITE 400

Address

DORAL, FL 33172

City/State and Zip Code

V.MEDINAINVESTMENTS@GMAIL.COM

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

For further information concerning this matter, please call:

MARIA ELENA SEMIDEY

786

2003303

at ( )

Name of Person

Area Code

Daytime Telephone Number

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**

MATERIALS, SUPPLIES & PARTS SOLUTIONS 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 07/07/2017 and assigned  
Florida document number L17000146336.

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)

**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:

New Registered Office Address:

*Enter Florida street 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**

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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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RAMOS, ANTONIO J	AV BAEDEKER NRO 10	<input type="checkbox"/> Add
		ACARIGUA, PO. 03303	<input checked="" type="checkbox"/> Remove
		VENEZUELA	<input type="checkbox"/> Change
MGR	GUTIERREZ, ROSA E	CALLE 2 GASAC2-31 PETIMOR.	<input type="checkbox"/> Add
		CABUDARE, LA. 03023	<input checked="" type="checkbox"/> Remove
		VENEZUELA	<input type="checkbox"/> Change
MBR	RAMOS, ANTONIO J	AV BAEDEKER NRO 10	<input checked="" type="checkbox"/> Add
		ACARIGUA, PO. 03303	<input type="checkbox"/> Remove
		VENEZUELA	<input type="checkbox"/> Change
MBR	GUTIERREZ, ROSA E	CALLE 2 CASA C2-31 PETIMOR	<input checked="" type="checkbox"/> Add
		CABUDARE, LA. 03023	<input type="checkbox"/> Remove
		VENEZUELA	<input type="checkbox"/> Change
MGR	GONZALEZ, MARISELA	QTA MONTALBAN COLINAS	<input type="checkbox"/> Add
		DE ARAURE, ARAURE PO	<input checked="" type="checkbox"/> Remove
		VENEZUELA	<input type="checkbox"/> Change
MBR	GONZALEZ, MARISELA	QTA MONTALBAN COLINAS	<input checked="" type="checkbox"/> Add
		DE ARAURE, ARAURE PO	<input type="checkbox"/> Remove
		VENEZUELA	<input type="checkbox"/> Change

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DIVISION OF CORRECTIONS

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DIVISION OF CORRECTIONS

FILED

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

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated JULY 24 2017

Signature of a member or authorized representative of a member

FERNANDO MONTENEGRO

Typed or printed name of signee