## 11000215955

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 398974 8154674
AUTHORIZATION : Spelle Reman
COST LIMIT : \$25.00
ORDER DATE : September 20, 2018
ORDER TIME : 12:10 PM
ORDER NO. : 398974-010
CUSTOMER NO: 8154674
DOMESTIC AMENDMENT FILING  NAME: BNB DISTRIBUTION, LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Roxanne Turner EXT# 62969

EXAMINER'S INITIALS:

## **COVER LETTER**

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

BNB DISTRIBUTION, LL	С	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company	were filed on 10/18/2017	and assigned
Florida document number L17000215955		
This amendment is submitted to amend the following:		6
A. If amending name, enter the new name of the limited fiab	ility company here:	11 E 25 E
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "LL.C."
Enter new principal offices address, if applicable:	4204 Hammond Drive Unit 5	φ.
(Principal office address MUST BE A STREET ADDRESS)	Winterhaven, FL 33881	
	4204 Hammond Drive Unit 5	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	Winterhaven, FL 33881	<del></del>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		nter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del></del>
	, Floric	la
-	City	Zıp 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>Title</u>	Name	Address	Type of Action
AMBR	BUMPS N BABIES LTD	34 A ANEURIN BEVAN AVE	<b>⊠</b> Add
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Effective date, if other t If an effective date is listed, th	han the date of filing a date must be specific and	cannot be prior to date of fi	(op ling or more than 90 days aff	tional) er filing.) Pursuant to 605,0207
Note: If the date inserted document's effective date	in this block does not u	neet the applicable statut	ory filing requirements, the	iis date will not be listed as
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he record specifies a	delayed effective d	ate, but not an effe	ctive time, at 12:01	a.m. on the earlier o
The 90th day after	the record is filed.			
Dated				
		201		•
	Signature of a r	1-Uml		13
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		Stephen Ruck		

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Filing Fee: \$25.00