Division of Corporations Electronic Filing Cover Sheet

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(((H180000100413)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZBOM.COM INC.

Account Number: 120010000062 Phone: (323)962-3600 Fax Number: (323)962-3889 RECEIVED

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JAN - 9 2018

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	
		 -

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BENNS INDUSTRIAL SUPPLY, LLC

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Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

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Corporate Filing Menu

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TO:

Registration Section

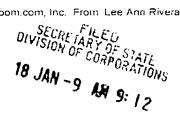
## **COVER LETTER**

Div	tsion of Cor	porations		
OF THE TRACE.	BENNS II	NDUSTRIAL SUPPLY, LL	С	
SUBJECT:		Name of Lim	ited Liability Company -	
			••	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	indence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	, <u>, , , , , , , , , , , , , , , , , , </u>
		Legalzoom.com, Inc.		
Firm/Company			<del></del>	
101 N. Brand Blvd., 11th Floor				
Address				
		Glendale, CA 91203		
	City/State and Zip Code			
	geb@cjmulanixco.com  F-mail address: (to be used for future annual report notification)			cation)
For further in	nformation c	oncerning this matter, please or		
Cheyenne !	Moseley		800 773-0888 ext	t. 9724
Name of Person		f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy ir nelosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr	ING ADDRESS: ation Section of Corporations	STREET/COURIE Registration Section Division of Corpora	

P.O. Box 6327
Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tullahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(Name of the Limited Liability Comma (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000256103	were filed on 12/15/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	pility Company." the designation "LLC" or o	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2803 Gulf To Bay Blvd.	
(Principal office address MUST BE A STREET ADDRESS)	Clearwater, FL 33759	
Enter new mailing address, if applicable:	2803 Gulf To Bay Blvd.	
(Mailing address MAY BE A POST OFFICE BOX)	Clearwater, FL 33759	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address:		er the name of the
	Enter Florida street address . Florida	

### 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
		- it	☐ Add
			☐ Remove
			DIVISION OF COR
		· <u>+</u> ·· · · · · · · · · · · · · · · · · ·	PORATIONS  Add  Add  Add  Add  Add  Add  Add  A
			<b>7</b>

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18 JAN	DN C
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12	

. If amending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of fill (The effective date must be specific, cannot be prior to	ing:(optional) date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Departn	
Dated <u>Pecember</u> 29	_, <u>2017</u> .
<u> </u>	11 <del>7</del>
Signature of	a member or authorized representative of a member
	George Edward Benns III
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00