L18000005689

(Re	equestor's Name)	-
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name))
(Da	ocument Number)	
,	,	
Certified Copies	Certificates of	f Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

Division of Corporations			
SUBJECT: 6-0 SU	PPLY, L.L.C. Name of Limite		
	Name of Limite	d Liability Company	
The enclosed Articles of Am	endment and fee(s) are submi	itted for filing.	
Please return all corresponde	ence concerning this matter to	the following:	
	JORGE JO	OSE LACTUZ PEREZ	
	(Name of Person	
		Firm/Company	
	0012 Tir	MOLAN DRIVE APT #7	ጎ2
		BERIAR DRIVE APT #20	<u>^</u>
		/ 40	
	<u> 115511111E/</u>	FLORIDA 34747	
	,	City/State and Zip Code	
_	E-mail address: (to	be used for future annual report notificati	on)
For further information conc	erning this matter, please call	l:	
707GE 70SE	LACITUR PETTER	at (<u>107</u>) <u>783 698</u> Area Code Daytime Tel)
Name of Per	rson (Area Code Daytime Tel	ephone Number
Enclosed is a check for the fo	ollowing 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:

TO:

Registration Section

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

G_0 SUPPL	-Y , L. L . C.	
(<u>Name of the Limited</u> (人	Liability Company as it now appears on our records.) Florida Limited Liability Company)	-
The Articles of Organization for this Limited Liab Florida document number <u>L180005689</u>	ility Company were filed on $01/08/2018$	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
GO SUPPLY L.L.C.		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the	
Enter new principal offices address, if applicab	le:	78
(Principal office address MUST BE A STREET		三 三 五
		25
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u></u>	資本 0
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, <u>en</u> <u>e address here</u> :	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Reg	tistered 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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			☐ Change
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			□ Remove
			Change
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ive date, if other than the date of filing: fective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable shent's effective date on the Department of State's records.	tatutory filing req	uirements, this dat	te will no	nt to 60: t be list
ne 90th day after the record is filed.	/ concentre time	, at 12.01 a.m	. on an	Cuin
ed Jamuary 24 . 2018 /				
ed Awmuna A . NOTO .				
0	-	·r·		
Signature of a member or authorized	representative of a	member		
JORGE JO Typed or printed nan	SE LACIOU	7 PEGEZ		

Filing Fee: \$25.00