10/11/2019

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190003031943)))



H190003031943ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

· Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: OLDER LUNDY & ALVAREZ

Account Number : I20190000084 Phone

Fax Number

: (813)254-8998 : (813)839-4411

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BULK NATION ECOMM, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

BULK NATION ECOMM, LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: ADAM D. BIRCH, ESQ. Name of Person OLDER LUNDY & ALVAREZ Firm/Company 1000 WIEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM B-mult address: (to be used for future annual report notification) For further information concerning this matter, please call: ADAM D. BIRCH, ESQ.	(O): Registration Section Division of Corpor			
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: ADAM D. BIRCH, ESQ. Name of Person OLDER LUNDY & ALVAREZ Figur/Company 1000 WEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:		N ECOMM, LLC		
Please return all correspondence concerning this matter to the following: ADAM D. BIRCH, ESQ. Name of Person OLDER LUNDY & ALVAREZ Firm/Company 1000 WEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM B-muil address: (to be used for future annual report notification) For further information concerning this matter, please call:	UBJECT:	Name of Limit	ed Liability Company	
ADAM D. BIRCH, ESQ. Name of Person OLDER LUNDY & ALVAREZ Firm/Company 1000 WEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM B-muil address: (to be used for future annual report notification) For further information concerning this matter, please call:				
Name of Person OLDER LUNDY & ALVAREZ Figur/Company 1000 WEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:	he enclosed Articles of Am	endment and fee(s) are subir	nitted for filing.	
Name of Person OLDER LUNDY & ALVAREZ Firm/Company 1000 WEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:	lesse return all corresponde	nce concerning this matter to	the following:	
OLDER LUNDY & ALVAREZ Figur/Company 1000 WEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:		ADAM D. BIRCH, ESQ.		
Fint/Company 1000 WEST CASS STREET Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM B-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:			Name of Person	
Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM B-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:		OLDER LUNDY & ALVA	REZ	
Address TAMPA, FL 33606 City/State and Zip Code ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:			.Firm/Сотралу	
City/State and Zip Code ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:	•	1000 WEST CASS STREE	Т	
City/State and Zip Code ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:			Address	
ABIRCH@OLALAW.COM E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:	. : .	TAMPA, FL 33606	· ·	•
E-muit address: (to be used for future annual report notification) For further information concerning this matter, please call:			City/State and Zip Code	+
For further information concerning this matter, please call:		•		
254 2004		E-muil address: (to	o be used for future annual report notific	cation)
ADAM U. BIRCH, ESQ. 813 254-8998	For further information cond	cerning this matter, please ca	H:	
	ADAM D. BIRCH, ESQ.		at (
Name of Person Area Code Daytime Felephone Number	Name of P	rizo u	Ares Code Daytine	l'elephone Number
	Enclosed is a check for the t	following amount:		
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).	Cl \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional capy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURTER ADDRESS: Registration Section Division of Corporations

Cliffon Building 2661 Executive Center Circle Tallahussee, FL 32301

Page 4 of 6

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION



2510 OCT 17 7 1: 16

BIJLK NATION ECOMM, LLC			
(Name of the i.lmi)	ed Limbility Compo (A Florida Limited	ny as it now annears on our Liability Compiny)	records.
The Articles of Organization for this Limited Li Florida document number L18000033668	ability Company	were filed on February	2018 and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liebi	lity Company," the designation	n "11.C" or the abbreviation "1.1.C."
Enter new principal offices address, if applica	ıble:	8125 25TH COURT RA	ST .
(Principal office address MUST BE A STREE	TADDRESS)	SARASOTA, FL 34243	
			· · · · · · · · · · · · · · · · · · ·
Fater new mailing address, if applicable:		8125 25TH COURT EA	ist
(Mailing address MAY BE A POST OFFICE)	3 <i>0X</i>)	SARASOTA, FL 34243	
B. If amending the registered agent and/registered agent and/or the new registered of	lice address her	2:	ecords, enter the name of the new
Name of New Registered Agent:	JONATHAND	RAKE, JR.	
Now Registered Office Address:	8125 25TH CO		·
	·	Enter Florida strect	addiess
	SARASOTA		, Florida 34243
Nam Projection & A. 19 19		City	Zip Code
New Registered Agent's Signature, if changing R	egistered 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 morely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent, Signature of New Registered Agent

Page I of 3

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> Fitle</u>	<u>Name</u>	Address	Type of Action
AMBR	KAREN A. SARDINA	10275 WINDHORST KOAD	[] Add
•		TAMPA, PL 33619	■ Remove
			☐ Change
AMDR	SCOTT A. JACKSON	10275 WINDHORST ROAD	C] Add
		TAMPA, FL 33619	≅ Remove
			El Change
AMBR	GARY LANOE	10275 WINDHORST ROAD	Add
		TAMPA, FL 33619	■ Remove
			☐ Change
AMBR	CHADWICK WILTON	8125 25TH COURT EAST	■ Add
		SARASOTA, FL 34243	☐ Remove
			☐ Change
MGR	JONATHAN DRAKE	C/O WHIPTOOR WILL HOLDINGS	
		50 CARROLL STREET, UNIT 220	□ Remove
		TORONTO, ONTARIO CANADA - M4M 3G3	■ Change
			□ Add
			□ Remove
			☐ Change

lfame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
-		
_		
_		
		•
_		
-		
٠		
_		
_		
-		
-		
-		
_		
-		
. •		
-		
f an elf <u>Note:</u>	ive date, if other than the date of filing: (optional) ective 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. If the date inserted in this block does not need the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.	.0207 cd as
ie rec The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied 90th day after the record is filed.	er of:
Dated	<u>509.18.2019.</u>	
	Signature of a member or authorized representative of a member	
	Chadricle Wilfon	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00