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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 : (561)694-8107 Phone Fax Number : (561)214-8442

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AXIS REDISTRIBUTION, LLC

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June 29, 2021

## FLORIDA DEPARTMENT OF STATE Division of Corporations

AXIS REDISTRIBUTION, LLC 4440 PGA BLVD., SUITE 600 C/O SHUSTER LAW FIRM, P.L. PALM BEACH GARDENS, FL 33410US

SUBJECT: AXIS REDISTRIBUTION, LLC

REF: L18000065059

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

BRIANNA C BIRO

FAX Aud. #: H21000252410 Regulatory Specialist I Letter Number: 021A00014839

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

f.: 22 m/3:00

AXIS REDISTRIBUTION, LLC		. 0. (
	ny as it now appears on our records.) .iability Company)	<del></del>
The Articles of Organization for this Limited Liability Company  Plorida document number L18000065059	were filed on 03/14/2018	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	Axis Redistribution, LLC	
Principal office address MUST BE A STREET ADDRESS)	iability company here:  iability Company," the designation "LLC" or the abbreviation  Axis Redistribution, LLC  8965 E. Sligh Ave.  Tampa, FL 33610  Axis Redistribution, LLC  8965 E. Sligh Ave.  Tampa, FL 33610  ce address on our records, enter the name of the	
THE GALVAGE CONTRACT OF THE STATE OF THE STA	Tampa, FL 33610	LLC
Inter new mailing address, if applicable:	Axis Redistribution, LLC	
Mailing address MAY BE A POST OFFICE BOX)	Liability Company here:  Liability Company." the designation "L.L.C" or the abbreviation "L.L.C  Axis Redistribution, LLC  8965 E. Sligh Ave.  Tampa, FL 33610  Axis Redistribution, LLC  8965 E. Sligh Ave.  Tampa, FL 33610  Fice address on our records, enter the name of the new records of the new records.  Enter Florida street address  , Florida	
	Tampa, FL 33610	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter th</u>	e name of the new regi
New Registered Office Address:	Enter Florida street address	
	Flori	da
		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

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>	Address	Type of Action
MGR	MERCUR, WILLIAM J	Axis Redistribution, LLC	
		8965 E. Sligh Ave.	□Remove
		Tampa, FL 33610	■Change
			□Remove
			Change
			□ Add
			Remove
			Change
		<del> </del>	□Add
			□Remove
			Change
		<del></del>	
		<del></del>	□Remove
			Change
			□Add
			□Remove
			□ Change

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Filing Fee: \$25.00