

L19000 032 723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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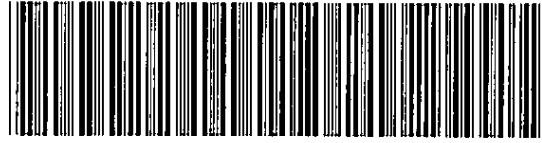
(Business Entity Name)

(Document Number)

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2019 NOV -8 AM 12:25  
STATE OF MISSISSIPPI  
TALLAHASSEE, FLORIDA

Y. CHAMBER

DEC 07 2019

**RABIA ALI / IMTIAZ ALI**

**6749 BULRUSH COURT**

**WEST PALM BEACH FL 33413**



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ACS DISTRIBUTION LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/31/2019 and assigned Florida document number L19000032723.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida

City

\_\_\_\_\_, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	IMTIAZ K ALI	6749 BULRUSH COURT, WEST PALM BEACH, FLORIDA 33413	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RABIA A ALI		<input type="checkbox"/> Add
		6749 BULRUSH COURT, WEST PALM BEACH, FLORIDA 33413	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
PRES	IMTIAZ K ALI		<input type="checkbox"/> Add
		6749 BULRUSH COURT, WEST PALM BEACH FL 33413	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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