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(Rec	questor's Name)	
(Add	iress)	
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(City	//State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nam	e)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



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COVER LETTER

TO: Registration of Division of	on Section Corporations	·	
	DIRECT.COM		
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Article	es of Amendment and fee(s) are sub-	mitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	Julio Cesar Mateo		
		Name of Person	
		Firm/Company	
	6556 Broadway Ave		
		Address	
	Jacksonville, FL 32254		
		City/State and Zip Code	···
	julio@jwsupply.net	to be used for future annual report notifica	ation
For further information	tion concerning this matter, please co	·	•
Julio Cesar Mateo		904 465-1517	
N	ame of Person	Area Code Daytime T	Selephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing F	ree ☐ \$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 A	ddress:	Street Address: Registration Section	ion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E-BUYDIRECT.COM		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 05/22/2019	and assigned
lorida document number L19000138029		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
fain Source Supply LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:	6556 Broadway Ave	
Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32254	9.23 10.23 1
The spat office address Most be 1151 KB2 1110 KB250		,
nter new mailing address, if applicable:	6556 Broadway Ave	
	Jacksonville, FL 32254	
Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	City	гір сош

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
			□ Add
			□Remove
			☐ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Add
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effe	ve date, if other than the date of filing: (optional) retive 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 605.02
<u>te:</u> :um	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s fil	ed.
,.	Tuly 12 2024
.ed	·

Filing Fee: \$25.00

Typed or printed name of signee