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| PICK-UP WAIT MAIL                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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A. BUTLER

## **COVER LETTER**

TO:

| FO: Registration<br>Division of C | Section<br>Corporations   |  |   |
|-----------------------------------|---|--|---|
| SUBJECT: MILLE                    | R DISTRIBUTORS, LLC   |  |   |
| SUBJECT.                          | Name of Lin   | nited Liability Company  |   |
| The enclosed Articles             | of Amendment and fee(s) are sub   | omitted for filing.  |   |
| Please return all corre           | spondence concerning this matter  | to the following:  |   |
|                                   | John O. Kochkerian  | , Esq., CPA  |   |
|                                   | II/ Love D.A  | Name of Person   |   |
|                                   | JK Law, P.A.  | Firm/Company   | <del></del>   |
|                                   | _925_S_Federal_Hig  | hway, Ste. 125   |   |
|                                   | Boca Raton, FL 334  | 132 City/State and Zip Code  |   |
| For further informatio            | john@jklawpa.cor<br>E-mail address:<br>n concerning this matter, please o | n<br>(to be used for future annual report noti   | fication)   |
| John O. Kochke                    | - ,   | at ( 954 ) 954-818-  | 9795  |
| Nam                               | e of Person   | Area Code Daytim   | e Telephone Number  |
| Enclosed is a check fo            | r the following amount:   |  |   |
| \$25.00 Filing Fee                | S30.00 Filing Fee & Certificate of Status                                 | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)                            | □ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
| P.O. Box 6                        | n Section<br>Corporations   | Street Address: Registration Set Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL | porations<br>fallahassee<br>e Street, Suite 810   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED

| Miller Distrib   | outors, UC   | 2022 MAR 15  | 1M 7:01                             |
|--|--|--|-------------------------------------|
| (Name of the Limited   | Liability Company as it<br>Florida Limited Liability | non appears on our, re<br>Company C. TAC T<br>TALLAHAS | SH'STATE<br>SEE, FL                 |
| The Articles of Organization for this Limited Lial   | bility Company were f                                | iled on <u>6/12/2019</u>                               | and assigned                        |
| Florida document number <u>L19000155357</u>  | ·  |  |                                     |
| This amendment is submitted to amend the follow  | ving:  |  |                                     |
| A. If amending name, enter the new name of t   | he limited liability co                              | mpany here:  |                                     |
| The new name must be distinguishable and contain the wor                                     | rds "Limited Liability Com                           | pany," the designation                                 | "LLC" or the abbreviation "L.L.C."  |
| Enter new principal offices address, if applical   | ole:   |  |                                     |
| (Principal office address MUST BE A STREET   | ADDRESS)   |  |                                     |
|  |  |  | <del></del>                         |
| Enter new mailing address, if applicable:  |  |  |                                     |
| (Mailing address MAY BE A POST OFFICE B  | <u> </u>   |  |                                     |
|  |  |  |                                     |
| B. If amending the registered agent and/or regagent and/or the new registered office address |  | s on our records, <u>er</u>                            | nter the name of the new registered |
| Name of New Registered Agent:  | John O. Kochkeri                                     | an, Esq., CPA  |                                     |
| New Registered Office Address:   | 925 S. Federal H                                     | ighway, Ste. 125<br>Enter Florida street a             |                                     |
|  | Boca Raton   |  | , Florida <u>33432</u>              |
|  | Cit  |  | 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 Registored 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>                                | Type of Action     |
|--------------|------------------|---|--------------------|
| AMBR         | Susan Noriega    | 8665 waterriest Circle                        | 2 EQAdd            |
|              |                  | -8665 waterriest Circle<br>Parkland, FL 33076 | □Remove            |
|              |                  |   | □Change            |
| AMBR         | Kris Kachaturian | 1001 West Nawport Center D                    | <b>⊄.</b> □Add     |
|              |                  | #109, Dearfield Beach, PC 334                 | <u>142</u> ⊠Remove |
|              |                  |   | □Change            |
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| ffective date, if other that an effective date is listed, the dote: If the date inserted in ocument's effective date on | ite must be specific<br>this block does r | c and cannot be pr<br>not meet the app | licable statutory  |                                       |                  |                    |
| record specifies a delayed e<br>Lis filed,  | Tective date, but                         | not an effectiv                        | e time, at 12:01 a | i.m. on the earli                     | er of: (b) The S | 00th day after the |
|   |   | 2022                                   |                    |                                       |                  |                    |
| March 11  |   | _                                      |                    |                                       |                  |                    |
| ated March 11   |   |  |                    |                                       |                  |                    |
| ated March 11   |   |  | <del></del>        |                                       |                  |                    |
| ated March 11   | Signature                                 | of a member or at                      | uthorized represen | tative of a membe                     | r                |                    |

Filing Fee: \$25.00