L20000034266

(Re	equestor's Name)	
(Ad	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO:

TO: Registration Sec Division of Corp	tion orations			
	D SUPPLY, LLC			
SUBJECT:	Name of Limited	Liability Company		
The enclosed Articles of A	Amendment and fee(s) are submi	tted for filing.		
	ndence concerning this matter to			
	JINGER A BRINKLEY			
		Name of Person		
	YARD CARD SUPPLY, LI	.C		
		Firm/Company		
79449 PLUMMERS CREEK DRIVE				
		Address		
YULEE, FL 32097				
		City/State and Zip Code		
	JINGER@YARDCARDSU	PPLY.COM be used for future annual report notifi	cation)	
For further information	concerning this matter, please ca			
JINGER A BRINKLEY	Ý	904 514-0707 a1 ()	N. d. w	
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	the following amount:		☐ \$60.00 Filing Fee.	
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Add</u>	ress:	<u>Street Address:</u> Registration Se	etion	
Registratio	n Section Corporations	Division of Co	rporations	
P.O. Box 6	327	The Centre of 2415 N. Monro	Fallahassee be Street, Suite 810	
Tallahasse	e. FL 32314	Tallahassee, Fl	L 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YARD CARD SUPPLY, LLC		
(Name of the Limited Liability Comp (A Florida Limited	nany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on JANUARY 28, 2020	and assigned
Florida document number L20000034266		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	nility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
Principal office address MUST BE A STREET ADDRESS)		- 6 T
		- [
		≟
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office	address on our records, enter the na	me of the new regis
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>	Address	Type of Action
MGR	JINGER A BRINKLEY	79449 PLUMMERS CREEK DR	= Add
		YULEE, FL 32097	🖸 Remove
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			□Add
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ective date, if other than the date effective date is listed, the date must be te: If the date inserted in this block nument's effective date on the Depart	e of filing:	applicable statut	filing or more than Story filing require	(optional) 0 days after filing, ements, this date) Pursuant to 605.020 will not be listed as
cord specifies a delayed effective da s filed.	te, but not an effec	tive time, at 12:	01 a.m. on the ea	rlier of: (b) Th	e 90th day after the
NOVEMBER 17	2020	· \)	
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Filing Fee: \$25.00