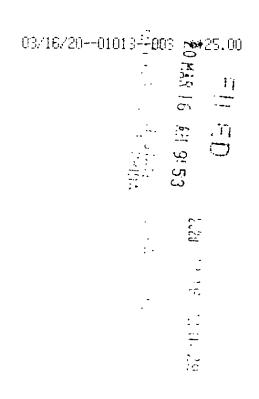


(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Namo	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	









CORPORATE ACCESS, _____

CORPORATE When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COPY	
xx	РНОТОСОРУ	
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xx	FILING	AMENDMENT
7	TCG DISTRIBUTION	LLC
(1	CORPORATE NAME AND DO	CUMENT #)
(+	CORPORATE NAME AND DO	CUMENT #)
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(•	CORPORATE NAME AND DO	CUMENT #)
((CORPORATE NAME AND DO	CUMENT #)

COVER LETTER

TO:

Registration Section

Division of	Corporations		
	ISTRIBUTION LLC		
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corr	espondence concerning this matter	r to the following:	
	ADA F BRAVO		
		Name of Person	
	TCG DISTRIBUTION LI	C	
		Firm/Company	 _
	1550 NEW BARN RD., S	TE. 104	
		Address	
	MIAMI LAKES FL 3301-	4	
	-	City/State and Zip Code	
	ADA@BRAVOACCOUN		
	E-mail address:	(to be used for future annual report no	otification)
For further information	on concerning this matter, please of	:all:	
ADA F BRAVO		954 963-8771 at ()	
Na	me of Person	Area Code Dayti	me Telephone Number
Enclosed is a check t	or the following amount:		
■ \$25.00 Filing Fe	e S30.00 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)
<u>Mailing Ad</u> Registratio		Street Address: Registration S	ection
Division of	of Corporations	Division of Co	
P.O. Box		The Centre of	Tallahassee
t allahasse	ee, FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appeal (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{02}{12}$ Florida document number $\frac{120000047855}{120000047855}$.	/17/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company he	ere:
The new name must be distinguishable and contain the words "Limited Liability Company," the d	lesignation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	20
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	- 53 - 53
3. If amending the registered agent and/or registered office address on our ragent and/or the new registered office address here:	ecords, enter the name of the new regis
Name of New Registered Agent:	
New Registered Office Address:	
	rida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida _

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	ALICIO PINA	15500 NEW BARN RD., STE. 104	₩ Add
	•	MIAMI LAKES FL 33014	□Remove
			□Change
MGR	NOSBELY TOLEDO	15751 SHERIDAN ST., STE, 180	
		SW RANCHES, FL 33331	□Remove
			□Change
MGR	THE CAFE GROUP	15500 NEW BARN RD., STE. 104	□Add
		MIAMI LAKES FL 33014	⊠Remove
			□Change
MGR	TOLEDOS ENTERPRISES LLC	15751 SHERIDAN ST., STE. 180	
		SW RANCHES, FL 33331	Remove
			Chânge 53
			□Remove
			□Change
			□Add
			□Remove
			□Change

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Ifective date, if other than the date of an effective date is listed, the date must be specifore: If the date inserted in this block does becument's effective date on the Department	not meet the applicab	date of filing or more le statutory filing r	(option than 90 days after fl equirements, this	n al) iling.) Pursu date will n	ant to 605. ot be liste	.0207 ed as
record specifies a delayed effective date, but is filed.	at not an effective tim	e, at 12:01 a.m. on	the earlier of: (b)	The 90th	day after	the
nted MARCH 13	2020	. •				
Nosbely Tolsdo Signature						

Filing Fee: \$25.00