(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doe	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I		
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Office Use Only



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COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

Bargain Pa	llets, LLC		
SUBJECT:	Name of Lim	ited Liability Company	. <u></u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Joshua Jennings		
		Name of Person	
	Bargain Pallets, LLC		
	1-11	Firm/Company	
	6254 Powers Ave Unit 714	4	
		Address	
	Jacksonville, FL 32217		
		City/State and Zip Code	
	joshua@bargain-bids.com		
	E-mail address: (to be used for future annual report n	otification)
For further information c	oncerning this matter, please c	all:	
Joshua Jennings		386 9866493 at ()	
Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$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 Addres Registration S		Street Address: Registration S	Section
Division of C	Corporations	Division of C	orporations
P.O. Box 632	.7	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BARGAIN PALLETS, I		
(Name of the Limited Liabin (A Florida	a Limited Liability Company)	
he Articles of Organization for this Limited Liability C	Company were filed on 4/16/2020	and assigned
lorida document number L20000105181	<u></u> .	
his amendment is submitted to amend the following:		
If amending name, enter the new name of the lim	ited liability company here:	2020
he new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or	the abbreviation "L.E.C."
inter new principal offices address, if applicable:		29
Principal office address MUST BE A STREET ADDI	RESS)	P - 12 C
		
		6 -
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registere gent and/or the new registered office address here:	d office address on our records, <u>enter the</u>	name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	laZin Code
	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>	Type of Action
MGR	Joshua Jennings	4666 Harbour North Ct	
		Jacksonville, FL 32225	Remove
			☐ Change
MGR Ryan Richter	890 S. Matlack St. #361	□Add	
	West Chester, PA 19382	Remove	
		□Change	
AMBR Joshua Jennings	4666 Harbour North Ct		
	Jacksonville, FL 32225		
		Change	
AMBR Ryan Richter	890 S. Matlack St. #361	= Add	
	West Chester, PA 19382	□Remove	
		□ Change	
			
		□ Remove	
		□ Change	
		□Add	
		□Remove	
			□ Change

Page 2 of 3

two members. They both have 50/50 ownership in the LLC. Thank you.	•
fective date, if other than the date of filing:	
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli The 90th day after the record is filed.	er of:
nted	

Page 3 of 3

Typed or printed name of signee