# 120000140001

	(Reque	stor's Name	*)	
	(Audres	ss)		<u> </u>
	(Addres	ss)		· · ·
	(City/St	ate/Zip/Pho	ne #)	
D P CK-J	, [	WAIT		MAIL
	(Busine	ess Entity N	ame)	
	(Docun	nent Numbe	er)	<u> </u>
Certified Copies		Certificat	es of Sta	atus
Special Instruction:	to Filir	ng Officer		

Office Use Only



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MAY 18 2021 I ALBRITTON

## Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 05/17/2021		**WALK IN**
ENTITY NAME GANDG	SUPPLY LLC	
	<u> </u>	<del></del>
DOCUMENT NUMBER		
	**PLEASE FILE THE ATTACHED AND RETURN**	
XXXX	Plain Copy	in the Eve
	Certified Copy	
<del></del>	Certificate of Status	
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINATI	DN	1
NUMBER OF CERTIFICAT	ES REQUESTED	<del></del>
TOTAL OWED \$25.00	ACCOUNT #: I201600	00072
		·-
Please call Tina at th	c above number for any issues or concerns. Thank g	yoa so much!

#### **COVER LETTER**

	ision of Cor						
SUBJECT:	GandG Sup	ndG Supply LLC					
	<del></del>						
The enclosed	LArticles of	Amendment and fee(s) are sul	emitted for filing				
			•				
Pieuse return	an correspo	ondence concerning this matter	to the following:				
		Mike Sevik					
			Name of Person	<del>, , , , , , , , , , , , , , , , , , , </del>	<del></del>		
		Zenbusiness Inc.					
			Firm/Company				
		5511 Parkerest Drive Suit	e 207				
			Address				
		Austin, Texas 78731					
			City/State and Zip Code				
		fulfillment@zenbusiness.co					
For further in	formation c	n-mair address: ( oncerning this matter, please c	to be used for future annual repail:	port notification)			
Mike Sevik c	z/o Zenbusin	ness Inc	844 493-	6249			
·	Name of	f Person	at () Area Code	Daytime Telepho	one Number		
Enclosed is a	check for th	ne following amount:					
<b>≡</b> \$25.00 F:	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy fadditional copy is enclos		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	ing Address istration S		Street Add				
_		orporations	<del>-</del>	on Section of Corporatio	ns		
	. Box 632			re of Tallahas			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

THE THE PARTY OF T

GandG Supply LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

			ć ;·
The Articles of Organization for this Limited Liability Con-	apany were filed on $\frac{5/22}{}$	'2020 —————	and assigned
Florida document number L20000140001			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here	2:	
Graits LLC			
The new name must be distinguishable and contain the words "Limited	l Liability Company," the desi	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our rec	ords, <u>enter the na</u>	me of the new register
agent and/or the new registered office address here:			
Name of New Registered Agent:	<del> ,</del>		<del></del>
New Registered Office Address:			
	Enter Florida	i street address	
	Plants.		
<del></del>	City	, r loriga _	Ziv Code
New Registered Agent's Signature, if changing Registered A	·		•
I hereby accept the appointment as registered agent and	t agree to act in this cap	pacity. I further a	gree to comply with th

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>Name</u>	<u>Address</u>	Type of Action
		□Add
		□Remove
		□Add
		□Remove
		ElChange
		□Add
		 □Remove
		□Change
		□Add
		□Remove
		<b>57</b> 0
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ffective date, if other than the dan effective date is listed, the date must lote: If the date inserted in this bloocument's effective date on the Dep	k does not meet the a	applicable statute	ing or more than 90 d ry filing requireme	_ <b>(optional)</b> ays after filing.) Pursu ats, this date will no	ant to 605.0207 of be listed as t
record specifies a delayed effective lis filed.	date, but not an effec	tive time, at 12:0	l a.m. on the earlic	er of: (b) The 90th	day after the
ated May 14	. 2021	·			
<u>/s/ Graeme Frankel</u> S	ignature of a member o	r authorized renses	entative of a member	_	
	-g	. aamermed repres			

Filing Fee: \$25.00