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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



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C. GOLDEN

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_	ACCESS, INC. P.O. Box 3	236 East 6th Avenue. Tallahassee, Florida 32303 x 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666		
		WALK IN		
	ľ	PICK UP: <u>08/31/2020</u>		
	CERTIFIED COPY	Y		
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xx	FILING	AMENDMENT		
((	<b>PEX SOURCING, I</b> CORPORATE NAME AND D	DOCUMENT #)		
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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OF	
	211 11 31 PH 2:57
APEX Sourcing, LLC	
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on August 5, 2	020 and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation	a "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our registered agent and/or the new registered office address here:	ecords, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street	
	GUUGE CON

If Changing Registered Agent, Signature of New Registered Agent

Florida \_

Zip Code

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

New Registered Agent's Signature, if changing Registered Agent;

company has been notified in writing of this change.

City

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	Mary Pat Borgese	4391 S Buffalo St., Unit 36	
		Orchard Park, NY 14127	🗆 Add
			Remove
			Change
			Add
			🗆 Remove
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		<u> </u>	Remove
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• D.' If amending any other information, enter change(s) here	: (Attach additional sheets, if necessary.)
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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	2020	
	Sauth Esq.	
	Signature of a member or authorized representative of a member	
Jeff Novatt, Esq., Aut	horized Representative	
	Typed or printed name of signee	

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