LZ0000310441

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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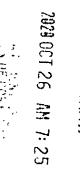
Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: Q Roberts	s Core Supply LLC			
5000007		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
		-		
	Chete Dzikunu			
		Name of Person		
	Q Roberts Core Si	ipply LLC		
	PRoberts Core Supply LLC Name of Limited Liability Company ticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: Chete Dzikunu Name of Person Q Roberts Core Supply LLC Firm/Company 8102 Sheldon Road, Apartment 414 Address Tampa, FL 33615 City/State and Zip Code qrobertscoresupplylle@hotmail.com E-mail address: (to be used for future annual report notification) mation concerning this matter, please call: nu at (
	8102 Sheldon Road, Apartment 414			
		Address		
	Tampa, FL 33615			
		City/State and Zip Code		
		-		
	E-mail address: (to be used for future annual report notifica	ation)	
For further information c	oncerning this matter, please c	all:		
Chete Dzikunu		at (850) 345-8258		
Name o	f Person		'elephone Number	
Enclosed is a check for the	ne following amount:			
№ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
	Section	Registration Secti		
	•	•		
P.O. Box 632 Tallahassee, I		The Centre of Tal 2415 N. Monroe S		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Q Roberts Core Supply LLC		00
(<u>Name of the Limited</u> (?	Liability Company as it now appears on our records.) A Florida Limited Liability Company)	7691 26 TI
The Articles of Organization for this Limited Lial	bility Company were filed on 10/01/2020	and assigned
Florida document number L20000310441	 -	F: 25
This amendment is submitted to amend the follow	ving:	-
A. If amending name, enter the new name of t	he limited liability company here:	
-	ds "Limited Liability Company," the designation "LLC" o	
Enter new principal offices address, if applical		
(Principal office address MUST BE A STREET	(ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	ox)	
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office address on our records, <u>enter th</u> <u>here</u> :	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flori	da
	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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Qwayne Roberts	2612 Belmont Oaks Lane	□Add
		Tampa, FL 33610	□Remove
			= Change
			□Add
			□Remove
			□Change
			□Add
			Change
			□Add
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ective date, if other than the effective date is listed, the date muster. If the date inserted in this blument's effective date on the December 2.	ock does not meet the	applicable statu	filing or more than tory filing require	(optional) 90 days after filing ements, this date	.) Pursuant to 605.020 will not be listed a
cord specifies a delayed effectiv s filed.	date, but not an effec	ctive time, at 12	:01 a.m. on the ea	urlier of: (b) Tl	e 90th day after the
ed October 22	. 2020	 -			
_Qwayns Ro					
· /	Signature of a member of	or authorized repr	esentative of a men	iber	
0					

Filing Fee: \$25.00