## L21 00000 8972

(Rec	questor's Name)	
(Add	Iress)	
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(City	/State/Zip/Phone	<del>=</del> #)
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## **COVER LETTER**

	Registration Sec Division of Corp			
SUBJEC		TRIBUTION LLC		•
SUBJEC	•	Name of Limi	ted Liability Company	
The enclo	osed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please re	turn all correspo	ndence concerning this matter t	to the following:	
		TYLER L LADAGE		_
			Name of Person	
			Firm/Company	<del></del>
		7532 TERN DR		
			Address	
		ORLANDO FL 32822		
		LADATYLER@YAHOO.C	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notified	ation)
For furth	er information co	oncerning this matter, please ca	ili:	
TYLER	L LADAGE		636 448-3235 at ()	
_	Name of	f Person	Area Code Daytime T	elephone Number
Enclosed	is a check for th	ne following amount:		
<b>■</b> \$25.0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Secti	ion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

FILED

LADA DISTRIBUTION LLC

2021 JAN 25 PH 4: 55

(A Florida Limited )	Liability Company)	SEUNETARY OF STATE TALLAHASSEF, FL
The Articles of Organization for this Limited Liability Company	were filed on $\frac{12/30/2020}{}$	
Florida document number L21000008972		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	TYLER L LADAGE	
(Principal office address MUST BE A STREET ADDRESS)	7532 TERN DR	
	ORLANDO FL 32822	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records.	enter the name of the new registere
Name of New Registered Agent:	· · · · · ·	
New Registered Office Address:	Enter Florida street	address
		, Florida
	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 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
AMBR	TYLER L LADAGE	7532 TERN DR	
		ORLANDO. FL 32822	□Remove
			□Change
		□Remove	
			□Change
			□Add
			□Remove
			Change
			□Add
		Remove	
			☐ Change
		□Add	
		Remove	
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			□Add
			□Change

	<u> </u>
an effectiv	date, if other than the date of filing:
	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as is effective date on the Department of State's records.
record sp Lis filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	D Jonuary 2157 2021
	Signature of a member or authorized representative of a member
	Tyler L ladase Typed or printed name of signee