

L21000345122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

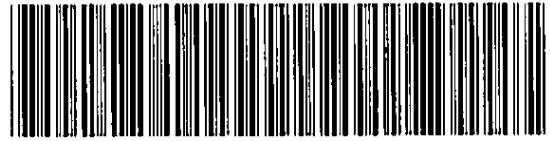
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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2021 SEP 24 AM 9:36

SECRETARY OF STATE  
TALLAHASSEE, FL

1 1 23

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dependable Packaging & Solutions, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jacob Rothman  
Name of Person

Mac Papers, LLC  
Firm/Company

3300 Philips Highway  
Address

Jacksonville, FL 32207  
City/State and Zip Code

jacob.rothman@macpapers.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacob Rothman 904 348-3396  
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the 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 Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee

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

Dependable Packaging & Solutions, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 07/29/2021 and assigned Florida document number 1.21000345122.

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 "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)

3300 Philips Highway

Jacksonville, FL 32207

FILED  
2021 SEP 24 AM 9:06  
CLERK OF THE  
SOLICITORS  
GENERAL  
TALLAHASSEE, FL

**B. If amending the registered agent and/or registered office address on our records, enter the name of the newly registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Jacob Rothman

New Registered Office Address:

3300 Philips Highway

*Enter Florida street address*

Jacksonville

Florida 32207

*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>	<u>Type of Action</u>
MGR	DANIEL PETRUCCI	700 BALDWIN PALM AVENUE	<input type="checkbox"/> Add
		PLANTATION, FL 33324	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	CHARLES PAQUIN	3300 PHILIPS HIGHWAY	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32207	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CFO	RON CROWELL	3300 PHILIPS HIGHWAY	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, FL 32207	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 September 21st 2021

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Jacob Rothman  
\_\_\_\_\_  
Typed or printed name of signee