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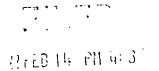


COVER LETTER

TO: Registration Section

Division of Co	rporations		
	DISTRIBUTORS I, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	EVELYN CORDOVES		
		Name of Person	
	TRIGAL DISTRIBUTOR	S I, LLC	
	11.00	Firm/Company	<u>.</u>
	5511 NW 112 AVE APT	108	
		Address	
	MIAMI, FL 33178		
		City/State and Zip Code	
	evelyncordoves26@gmail.c	om	
	E-mail address: (to be used for future annual report no	tification)
For further information of	concerning this matter, please c	all:	
EVELYN CORDOVES		786 503 4212	
Name o	f Person	Area Code Daytin	me Telephone Number
Enclosed is a check for t	he 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 S Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 17	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	rporations Tallahassee De Street, Suite 810

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



TRIGAL DISTRIBUTORS I, LLC

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

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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
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

Title	<u>Name</u>	Address	Type of Action
AMBR	DANILO SOTOLONGO		□Add
		5511 NW 112 AVE APT 108, MIAMI FL 33178	■Remove
			Change
			□Add
			□Remov e
			□ Change
			□Add
			□Remove
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ote: If the date inserted					
ote: If the date inserted ocument's effective date	ed effective date, but no	ot an effective time, a	t 12:01 a.m. on the ea	rlier of: (b) The 90th da	y after the
iote: If the date inserted occument's effective date record specifies a delayer	ed effective date, but no	3.35 PM	t 12:01 a.m. on the ea	rlier of: (b) The 90th da	y after the
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