L22000534047

(Re	equestor's Name)	
(Ad	ldress)	
,	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
- (D.		
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
	_	
		
Special Instructions to	Filing Officer:	

Office Use Only



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ALLAHASSEE TO

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202311, 131, 11112: 32

COVER LETTER

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SHOLDOTE. AFT	as Supply Forc	e LLC	
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	Anthony Del	, e c	
	(-	Name of Person	
	_		ري د
Division of Corporations SURJECT: Atlas Supply Force LLC Same of Limited Lability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Anthony Delec Name of Person Firm/Company 5802 52nd ave N Address Kenneth City FL 337c4 City/State and Zip Code Anthony Power City/State and Zip Code Company Enclosed is a check for the following amount: XS25.00 Filing Fee Certificate of Status Cortificate Copy (City/State and Zip Code City/State and Zip C			
	5802 52n3	ave N	2077
		Address	
	Kennedh Cil	J FL 33709	
	anthony@n	avisupply force. con	<u> </u>
			neasion)
For further information co			
Anthony [Deleo	at(_727)226	, - 70 84
Nune of	Person	Area Code Dayting	e Telephone Number
Enclosed is a check for th	e following amount:		-
		Certified Copy	Certificate of Status &
		<u> </u>	ction
_		Division of Cor	rporations
rananassee, f	L J2314		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

202

Atlas Supply France	ce LIC	- :
(Name of the Limited Liabilit	y Company as it now appears on our reco Limited Liability Company)	ords.)
ne Articles of Organization for this Limited Liability Co	ompany were filed on Decembe	12,2012 and assigned
orida document number <u>L22000554047</u>	. ,	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
orida document number 2223337577	<u> </u>	 (၁ (၁
nis amendment is submitted to amend the following:		10
. If amending name, enter the new name of the limi	ted liability company here:	
Navi Supply Force LLC he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "I	LC" or the abbreviation "L.L.C."
	, , ,	
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	(ESS)	
		<u> </u>
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
Manuing address MAT BE AT 0.31 OFFICE HOSY		
		
3. If amending the registered agent and/or registere	d office address on our records, en	ter the name of the new register
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street aa	ldress

	City	, Florida Zip Code
New Registered Agent's Signature, if changing Register		
hereby accept the appointment as registered agent provisions of all statutes relative to the proper and d accept the obligations of my position as registered of being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my dutie: agent as provided for in Chapter 6 red office address, I hereby confirm	s, and 1 am familiar with and 05, F.S. Or, if this document is
	If Changing Registered Agent, Signat	ure 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	
AMRR =	Authorized	Meml

<u>Title</u>	Name	Address	Type of Action
			🗆 Add
			□Remove
			☐ Change
			□ Add
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			□Add
			□Remove
			□Change

	2023
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	—— <u>15</u>
	<u></u> 32
	
	
	
	
Effective date, if other than the date of filing:	nt to 605,0207 (3 be listed as th
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th decord is filed.	lay after the
Dated March 31 2023	
Dated March 31 2023. In the Signature of a member or authorized representative of a member	
Anthony Deleo Typed or printed name of signee	

Filing Fee: \$25.00