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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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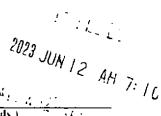
то:	Registration Second Cor		·	
er:n	AMC DIS	TRIBUTION COMPANY LIN	IITED LIABILITY COMPANY	
SUBI	IECT:	Name of Lin	nited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	e return all correspo	ondence concerning this matter	to the following:	
		Filing Angela		
		ZenBusiness, Inc.	Name of Person	
		336 E. College Ave., Suite	Firm/Company 2 301	
		Tallahassee, FL 32301	Address	
		ra@zenbusiness.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For fu	irther information c	oncerning this matter, please co	all:	
Filing	g Angela		844 493-6249	
	Name o	f Person		ne Telephone Number
Enclo	sed is a check for th	ne following amount:		
■ Si	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 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



AMC Distribution Company Limited Liability Company

(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 Compa	any were filed on 05/1	1/2023	and assigned
Florida document number L23000233373			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited I	iability company here	<u>:</u> :	
AMC Distribution LLC			
The new name must be distinguishable and contain the words "Limited L	iability Company," the desi	ignation "LLC" or the abbr	eviation "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 registered agent and/or the new registered office address h	l office address on c nere:	our records, <u>enter t</u> l	ie name of the new
Name of New Registered Agent:			
Name of New Registered Agent.	 .		
New Registered Office Address:	Farm Pf and	a street address	
	City	Florida	Tio Code
New Registered Agent's Signature, if changing Registered Age			z.p Code
· · · · · · · · · · · · · · · · · · ·			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ete performance of m as provided for in Ch	y duties, and I am far apter 605, F.S. Or, if	niliar with and this document is
IFC	hanging Registered Agen	t, Signature of New Regi	stered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	Name Anthony Charpentier	Address	Type of Action
MGR			
			□ Remove
		4181 76th Ave North, 212 Pinellas Park, FL 33781	☐ Change
			Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			Add
			Remove
		·	☐ Change
			Add
			Remove
			Change
			Add
			Remove
			Change

E. Effective date, if other than the date of filing:		
Mote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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		
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Dated June 3 . 2023 . Signature of a member or authorized representative of a member	<u>Note:</u> 11	ie date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
Signature of a member or authorized representative of a member	(f the recor (b) The 9	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: the day after the record is filed.
	Dated	June 3
		A/
Anthony Champaria		Signature of a member or authorized representative of a member
Additionly Charpentier		Anthony Charpentier

Page 3 of 3

Filing Fee: \$25.00



Date: June 5, 2023

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

Re: AMC DISTRIBUTION COMPANY LIMITED LIABILITY COMPANY - File Number: 03225597

To Whom It May Concern:

Attached please find the executed FL-Certificate of Amendment the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc. Attention: Filing Angela 336 E. College Ave. Suite 301 Tallahassee, FL 32301

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com

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Thank you,

Angela Futrell
ZenBusiness Customer Success