M 11 0000003720

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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OCT - 6 2011

EXAMINER



700212747107

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SECRETARY OF STATE



ACCOUNT NO. : I2000000195

REFERENCE : 920941 7849065

AUTHORIZATION

COST LIMIT

ORDER DATE: September 22, 2011

ORDER TIME : 1:22 PM

ORDER NO. : 920941-025

CUSTOMER NO: 7849065

FOREIGN FILINGS

NAME: MG DISTRIBUTION, LLC

XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT#

EXAMINER:

COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT: MG D		T * *, 11		iny)
	(Name of Foreign	Limited Li	ability Compa	iny)
Dear Sir or Madam:				
The enclosed applic	ation, certificate and fee(s)	are submi	tted for filing.	
Please return all cor	respondence concerning th	is matter to	the following	g :
Robin Miller				
	(Name of Person)		 ,	
MG Distribution LI			<u></u>	
	(Firm/Company)			
1310 Union Street				
	(Address)			
	, ,			
Spartanburg, SC 29	9302-3342			
	(City/State and Zip Code	e)		
For further informat	ion concerning this matter,	please cal	l :	
Robin Miller		t (<u>864</u>) 699-3568	
(Nam	ne of Person)	(Area Code	e & Daytime T	elephone Number)
STREET/C	OURIER ADDRESS:	,	MAILIN	G ADDRESS:
Registration	Registration Section			
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327		
2661 Executive Center Circle		Tallahassee, Florida 32314		
Tallahassee,	Florida 32301			
Enclosed is a check	for the following amount	:		
3 \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status		Filing Fee & lied Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State: MG Distribution, LLC
2.	Jurisdiction of its organization: Illinois
3.	Date authorized to do business in Florida: 7/22/2011
	SECTION II (4-7 complete only the applicable changes)
	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 9/2/2011
5.	New name of the limited liability company: The Merit Distribution Group, LLC
	(must end with "Limited Liability Company, ""L.L.C.," or "LLC.")
Fle the or	Fname unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting a alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.") If the amendment changes the period of duration, indicate new period of duration:
Ο.	If the alteriories changes the period of duration, indicate new period of duration.
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
	If the amendment corrects any false statement, indicate the statement being corrected and the correction:
9.	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is reganized. Signature of a number or the authorized representative of a member
	Mayank Singh
	Typed or printed name of signee

Filing Fee: \$25.00

File Number

0357834-8



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

MG DISTRIBUTION, LLC, AN ILLINOIS LIMITED LIABILITY COMPANY AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS FILED ON SEPTEMBER 2, 2011, AN AMENDED APPLICATION TO CHANGE THEIR NAME TO THE MERIT DISTRIBUTION GROUP, LLC. AND IS IN GOOD STANDING AS OF THIS DATE.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 23RD

day of

SEPTEMBER

A.D.

2011

Authentication #: 1126600753

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE