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COVER LETTER

TO	e Registration Se Division of Cor					
en.	DIECT.	Moise Logistics Group, LLC				
Name of Limited Liability Company						
The	e enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Ple	ase return all correspo	ndence concerning this matter	to the following:			
		Pauline Joseph				
			Name of Person			
		Moise Logistics Gro	up, LLC			
			Firm/Company			
		5304 NW 67th Ave				
			Address			
		Fort Lauderdale, FL 33	3319			
			City/State and Zip Code			
		edmoise@mlgllc.org				
			to be used for future annual report notifica	ation)		
For	further information co	oncerning this matter, please ca	all:			
	Edward	Moise	954 270-9322			
	Name o	f Person	at () Area Code Daytime T	elephone Number		
Enc	closed is a check for th	e following amount:				
Ø	\$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

Moise Logistics	Group, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Ciability Company)	·		
The Articles of Organization for this Limited Liability Company Florida document number	11/05/2012	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Moise Logistics Group, LLC				
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	abbreviation "L,L.C."		
Enter new principal offices address, if applicable:	Edward Moise			
(Principal office address MUST BE A STREET ADDRESS)	5304 NW 67th Avenue			
	Fort Lauderdale, FL 33319			
Enter new mailing address, if applicable:	Pauline Joseph			
(Mailing address MAY BE A POST OFFICE BOX)	5304 NW 67th Avenue			
	Fort Lauderdale, FL 33319			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		1 H		
		- American		
New Registered Office Address:	Enter Florida street address	2) 10-		
	Miller & per toda directi desdi 633			
	, Florida _	<u> o</u>		
	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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGR	Edward Moise	5304 NW 67th Ave, Fort Lauderdal		
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			Change	
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Note: If the date inserted	than the date of filing: e date must be specific and cannot le in this block does not meet the on the Department of State's re	applicable statutory fi	lling requirements, this da	ng.) Pursuant to 605	.0207 (3)(b ed as the
the record specifies a o) The 90th day after	delayed effective date, b the record is filed.	out not an effectiv	e time, at 12:01 a.m	n. on the earlie	er of:
March 21 Dated	20)17			
	(/)	· · ·			
	Signature of a member	or authorized representa	live of a member		
	V	Pauline Joseph			

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Typed or printed name of signee

Filing Fee: \$25.00