

L14000117274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

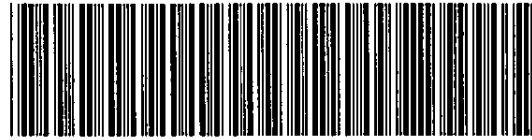
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

G. HARVEY
DEC 05
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: QUICKEN LOGISTICS, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BIANCA BAUERLE
Name of Person
RACHLIN & ASSOCIATES
Firm/Company
11120 N KENDALL DRIVE SUITE 201
Address
MIAMI, FL 33176
City/State and Zip Code
BIANCARSA@BELLSOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BIANCA BAUERLE at **305** **270-2040**
Name of Person Area Code Daytime Telephone Number

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Enclosed is a check for the 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 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**

QUICKEN LOGISTICS, LLC

(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 Company were filed on 07/25/2014 and assigned Florida document number L14000117274.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1310 PARK CENTRAL BLVD S

(Principal office address MUST BE A STREET ADDRESS)

SUITE C98

POMPANO BEACH, FL 33064

Enter new mailing address, if applicable:

1310 PARK CENTRAL BLVD S

(Mailing address MAY BE A POST OFFICE BOX)

SUITE C98

POMPANO BEACH, FL 33064

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:

1310 PARK CENTRAL BLVD S, SUITE C98

Enter Florida street address

POMPANO BEACH

City

Florida 33064

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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FREDERICO BAGGIO	201 S BISCAYNE BLVD	<input type="checkbox"/> Add
		28TH FLOOR	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33131	
MGR	FREDERICO BAGGIO	1310 PARK CENTRAL BLVD S	<input checked="" type="checkbox"/> Add
		SUITE C98	<input type="checkbox"/> Remove
		POMPANO BEACH, FL 33064	
MGR	PAULO NETO	201 S BISCAYNE BLVD	<input type="checkbox"/> Add
		28TH FLOOR	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33131	
MGR	PAULO NETO	1310 PARK CENTRAL BLVD S	<input checked="" type="checkbox"/> Add
		SUITE C98	<input type="checkbox"/> Remove
		POMPANO BEACH, FL 33064	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated NOVEMBER 14, 2014

X 

Signature of a member or authorized representative of a member

FREDERICO BAGGIO

Typed or printed name of signee

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