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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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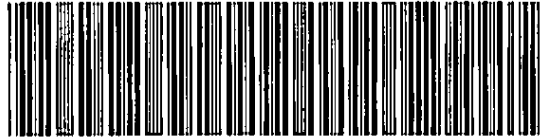
(Business Entity Name)

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ALABAMA SECRETARY OF REVENUE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJAV 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:

CLAUDIA DE VICENTE

Name of Person

AJAV LOGISTICS LLC

Firm/Company

2950 NW 13TH AVE

Address

MIAMI, FL 33142

City/State and Zip Code

tagua67@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CLAUDIA A DE VICENTE

786

716-6150

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

If Changing Registered Agent, Signature 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
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CLAUDIA A DE VICENTE	2950 NW 13TH AVE	☐ Add
		MIAMI, FL 33142	☒ Remove
			☐ Change
AMBR	CLAUDIA A DE VICENTE	2950 NW 13TH AVE	☒ Add
		MIAMI, FL 33142	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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MILWAUKEE

2821 JUL 30 AM 10:52

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 07/23/2021 _____

CLAUDIA A DE VICENTE

Typed or printed name of signee

Filing Fee: \$25.00