

Florida Department of State  
 Division of Corporations  
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L22000477854

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.  
Account Number : I20040000167  
Phone : (305)377-0809  
Fax Number : (305)377-0781

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Corporate@phyjalaw.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ACG LOGISTICS, LLC**

Certificate of Status	1
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APR 10 2023 10:31 AM  
 DIVISION OF CORPORATIONS  
 FLORIDA

2023 APR -7 PM 3:49

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 APR 10 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ACG 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 11/08/2022 and assigned Florida document number L22000477854

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

Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

7270 NW 35 TERRACE SUITE 702 MIAMI, FL 33122

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

[Blank lines for mailing address]

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:

Enter Florida street address

City, Florida 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 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/ QI	VICTOR A. BLANCO	7270 NW 35 TERRACE	<input checked="" type="checkbox"/> Add
		SUITE 702	<input type="checkbox"/> Remove
		MIAMI, FL 33122	<input type="checkbox"/> Change
MGR/ PRES/ CEO	FERNANDO XAVIER LOSADA	7270 NW 35 TERRACE	<input type="checkbox"/> Add
		SUITE 702	<input type="checkbox"/> Remove
		MIAMI, FL 33122	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

