SIGNATURE: PATRICIO BARREIRO

oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

1345 NW 98TH CT. UNIT 4

FEI Number: 46-3902391

Name and Address of Current Registered Agent:

BARREIRO, PATRICIO A 3622 RIVIERA CT. CORAL GABLES, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	BARREIRO, PATRICIO A	Name	ECHANIQUE, ADELAIDA M
Address	3622 RIVIERA CT.	Address	3622 RIVIERA CT.
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

Electronic Signature of Registered Agent

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: GLS LOGISTIC SOLUTIONS, LLC

DOCUMENT# L13000146935

Current Principal Place of Business:

1345 NW 98TH CT UNIT 4 DORAL, FL 33172

Current Mailing Address:

DORAL, FL 33172 US

Certificate of Status Desired: Yes

Electronic Signature of Signing Authorized Person(s) Detail

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

04/05/2016

MANAGING MEMBER

Date