

LOS 000069549

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(Address)

(City/State/Zip/Phone #)

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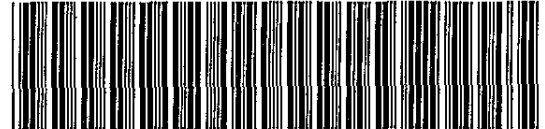
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** REGENCY LOGISTICS L.L.C.  
(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:

DORU REMUS ANDRONE

(Name of Person)

REGENCY LOGISTICS L.L.C.

(Firm/Company)

5900 TOWNSEND ROAD, SUITE 736

(Address)

JACKSONVILLE, FLORIDA 32244

(City/State and Zip Code)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

DORU REMUS ANDRONE

(Name of Person)

at ( 347 ) 992-0460

(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/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**REGENCY LOGISTICS L.L.C.**

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on JULY 15 2005 and assigned  
document number L05000069549.

**SECOND:** This amendment is submitted to amend the following:

The new street address of the principal office of the L.L. Company is:

5900 TOWNSEND ROAD, SUITE 736

JACKSONVILLE, FLORIDA 32244

The new mailing address of the principal office of the L.L. Company is:

5900 TOWNSEND ROAD, SUITE 736

JACKSONVILLE, FLORIDA 32244

The name and Florida street address of the registered agent is:

DORU REMUS ANDRONE

5900 TOWNSEND ROAD, SUITE 736

JACKSONVILLE, FLORIDA 32244

Dated 16TH JANUARY, 2006.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

DORU REMUS ANDRONE

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

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