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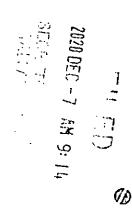
(Requ	uestor's Name)	
(Addi	ress)	
(Addr	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doct	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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LA. 1/20/21

COVER LETTER

TO: Registration Sec Division of Corp	orations		
SURJECT: SOUTH	ERN LOGISTICS	NTERNATIONAL L	LC
SOBSECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	idence concerning this matter	to the following:	
	DAUID B	BHA6WANDASS	
		Name of Person	.
		Firm/Company	
	8625 WEL	LINGTON VIEW	DR
		Address	
	WEST PAL	M BEACH, FL	3341/
		City/State and Zip Code	
	E-mail address: (to be used for future annual report n	otification)
For further information co	ncerning this matter, please c	all:	
AHANLYS Name of	BOCZ	at (<u>305</u>) <u>904</u> -	0245
Name of	Person	Area Code Day	time Telephone Number
Enclosed is a check for the	: following amount:		
X \$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 S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassee, I	Section Forporations of Tallahassee roe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		TERNATIONAL	LLC	
(<u>Name of the Limited Liah</u> (A Flor	bility Company as it rida Limited Liability	now appears on our recor Company)	<u>rds.</u>)	
The Articles of Organization for this Limited Liability Florida document number <u>L0500010732</u>	y Company were t	iled on	2005	_ and assigned
This amendment is submitted to amend the following:	:			
A. If amending name, enter the new name of the li	imited liability co	ompany here:		
The new name must be distinguishable and contain the words "L	Limited Liability Con	ipany," the designation "LL	.C" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			-رنن	
(Principal office addr <u>ess MUST BE A STREET AD</u> I	DRESS)			020
		,	•	DEC.
			· .	
Enter new mailing address, if applicable:			· · · · · · · · · · · · · · · · · · ·	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)				9
				-
				<u> </u>
B. If amending the registered agent and/or register agent and/or the new registered office address here		s on our records, <u>ente</u>	r the name o	f the new registere
	- '			
Name of New Registered Agent:				
New Registered Office Address:	_			
		Enter Florida street addre	ENZ	
		<u> </u>	lorida	
	Ci.	į.		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 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>	Type of Action
MGR ANARILYS BOCZ	AMARILYS BOCZ	8625 WELLINGTON VIEW DR.	XAdd
		WEST PALM BEACH, FL 3341	<u>/</u> □Remove
			□Change
			URemove
			□ Change
			□Remove
			□ Change
			□Add
			□Remove
			CChange
			□ Add
		 	□Remove
			DChange
			□Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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lf an cf: <u>Note:</u>	ive date, if other than the date of filing: 11/03/2020 (optional) feetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as thent's effective date on the Department of State's records.
e recor rd is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	11/28 , 2020 Dan Pharmanas. Signature of a member or authorized representative of a member
	Dari Paramanas.
	- John January Land
	Signature of a member or authorized representative of a member