## L06000074733

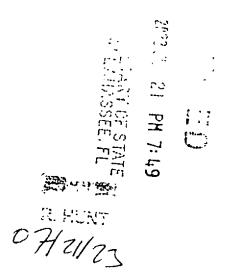
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Special Instructions to	Filing Officer;	
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## **COVER LETTER**

	egistration Se ivision of Cor					
		O EXPRESS, LLC				
SUBJECT	:	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub	_			
		Alex Perez				
		<del></del>	Name of Person			
		AROCEANO EXPRESS				
			Firm/Company			
		( <del>10 BOX</del> ) 66 W 1	Flagler ST 9TH Floo	ır		, ;
			Address			E/V)
		MIAMI, FL 331 <b>30</b>			) [변경 [변경]	P
		<del> </del>	City/State and Zip Code			7: 49
		boxexpress1@gmail.com			L H	to
For further	r information c	E-mail address: ( oncerning this matter, please of	to be used for future annual report notif	cation)		
		oncerning this matter, prease of				
Alex Pere			786 543-7239 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed i	s a check for th	he following amount:				
■ \$25.00	) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of State	
	failing Addres		Street Address: Registration Sec	tion		
Registration Section Division of Corporations		Division of Corp				
	O. Box 632		The Centre of Ta			
Т	'allahassee l	F1 3731 <b>4</b>	2415 N. Monroe	Street Suite 8	10	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AROCEANO EXPRESS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number <u>L06000074733</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: AVANT FREIGHT, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the ability at L.C. 66 W Flagler St 9Th Floor Enter new principal offices address, if applicable: Miami, FL 33130 (Principal office address MUST BE A STREET ADDRESS) 66 W Flagler ST 9TH Floor (<del>PO BOX</del>) Enter new mailing address, if applicable: Miami, FL 33130 (Mailing address MAY BE A POST OFFICE BOX) 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: 66 W Flagler St 9Th Floor New Registered Office Address: Enter Florida street address

## 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.

Miami

If Changing Registered Agent, Signature of New Registered Agent

, Florida 33130 Zip Code 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>	Address	Type of Action
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			□ Remove
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record specifies a	a delayed effective date,	but not a	ın effective	time, at 12	:01 a.m. on t	he earlier of: (	b) The 90th	day aft	er the
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Filing Fee: \$25.00