Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000396868 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email	Address:	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEUTRAL SEA, LLC

1-	
<b>e</b>	<u> </u>
• <u>•</u>	ORID
<b>=</b>	) (
ā	
_	ــا
S	SEE
ϒ	
	ĬΛ
<b>!</b> —	AHA
00	- ==
$\odot$	-
2021	
$\simeq$	共글
=	17.5

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

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

(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 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 "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (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:  New Registered Office Address:  Emer Florida street address  Emer Florida street address	NEUTRAL SEA, LLC	<b>8</b> 000 000 000 000 000 000 000 000 000 0
Florida document number L07000043373  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 "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (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:  New Registered Office Address:	(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
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 "L.L.C." or the abbreviation "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (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 Agent:  Name of New Registered Agent:  New Registered Office Address:	The Articles of Organization for this Limited Liability Company	were filed on 04/23/2007 and ass
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 "L.L.C." or the abbreviation "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  Bensenville, IL 60106	Florida document number L07000043373	<b>6.</b>
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)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  Bensenville, IL 60106	This amendment is submitted to amend the following:	<b>1</b> *
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (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:  New Registered Office Address:	A. If amending name, enter the new name of the limited liab	ility company here:
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Bensenville, IL 60106	The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  Bensenville, IL 60106  Bensenville, IL 60106  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 new principal offices address, if applicable:	951 Thorndate Avenue
(Mailing address MAY BE A POST OFFICE BOX)  Bensenville, IL 60106	(Principal office address MUST BE A STREET ADDRESS)	Bensenville, IL 60106
(Mailing address MAY BE A POST OFFICE BOX)  Bensenville, IL 60106	Enter new mailing address, if applicable:	951 Thorndale Avenue
Name of New Registered Agent:  New Registered Office Address:	(Mailing address MAY BE A POST OFFICE BOX)	Bensenville, IL 60106
New Registered Office Address:	agent and/or the new registered office address here:	address on our records, enter the name of the new registered
	New Registered Office Address:	Enter Florida street address
Florida		
City Zip Code		City Zip Code

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>	Address	Type of Action
Managing <u>Member</u>	NEUTRALOGISTICS LLC	951 Thorndale Avenue	□Add
		Bensenville, IL 60106	□Remove
			■Change
Operations Manager	Camilla Santos	951 Thorndale Avenue	■Add
		Bensenville, IL 60106	□Remove
			□Change
			DAdd
			□Remove
			□Change
			DAdd
			□Remove
			□Change
		<u> </u>	☐Add
			□Remove
			□Change
······			□Add
			Remove
			□Chanus

		·	<del> </del>	<del></del>
<del></del>				
····	· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·			T
				202
				202) 007
				725
				_
				AM IO:
	*. · · · · · · · · · · · · · · · · · · ·			
e at la la terration also also de la	4 C (SV		/	
ective date, if other than the data effective date is listed, the date must be	specific and cannot be prior to	date of filing or more than	(optional) 190 days after filing.) Pun	suant to 605.020
ite: If the date inserted in this block cument's effective date on the Depa	does not meet the applicab rtment of State's records.	le statutory filing requ	rements, this date will	not be listed a
ecord specifies a delayed effective d is filed.	ate, but not an effective time	e, at 12:01 a.m. on the	earlier of: (b) The 90	th day after the
October 25	, 2021	. •		
Courtney Nanke, Attorney				

Filing Fee: \$25.00