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COVER LETTER

TO:	Registration Se Division of Cor		4' # ´	
e.	DOT.	AMID Log	gistics, LLC	
SUBJI	ECT:	Name of Limi	ted Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Dmitriy S. Deych		
			Name of Person	
		AMID Logistics, LLC		
			Firm/Company	
		248 Geiger Road, Ste 2	01H	
			Address	
		Philadelphia, PA 19115		
		1 20.4	City/State and Zip Code	10 10 10
		info@InternationalShippin	-	<u> </u>
			o be used for future annual report notific	cation)
For fur	ther information c	oncerning this matter, please ca	11:	
Dmitri	y S. Deych		267 622-5156 at ()	
-	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$25	5.00 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

AMID Logistic	s, LLC					
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number L07000081077	were filed on	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:					
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."				
nter new principal offices address, if applicable: AMID Logistics, LLC	AMID Logistics, LLC					
	248 Geiger Road, Ste 201H	201H				
	Philadelphia, PA 19115					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	***************************************					
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		er the name of the n				
New Registered Office Address:		SSE 24				
Man registered Office (register)	Enter Florida street address , Florida	PH 2				
•••••••••••••••••••••••••••••••••••••••	City	Diri Zin 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 Changing Registered Agent, Signature of New Registered Agent

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
MGR	DEYCH, DMITRIY S	1800 Winchester Ave	□ Add
		Apt D5	□ Remove
		Philadelphia, PA 19115	Change
AMBR	SVIATENKO, GALINAS S	1011 NEW HOPE ST	□ Add
		73A	
		NORRISTOWN, PA 19401	
			Add
			□ Remove
			☐ Change
			
			☐ Remove
			Change
			Add
			□ Remove
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e record specifies a de The 90th day after the			but not a	an effective	e time, at 12	2:01 a.m	. on the	earlier (
ated April, 19			18	. •				
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		re of a made		and representati	ive of a member			

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Filing Fee: \$25.00