

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.

(((H100000132173)))



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

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE !

Account Number : I20000000146 Phone : (305) 444-4994

Fax Number : (305)444-4977

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 QUALITY LOGISTIC GROUP, LLC.

	
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

C. LEWIS JAN 2 1 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

FILEDORS

2010 JAN 20 AM 8: 21

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

YUBLITY LOGISTICS Group, LL							
(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 and assigned Florida document number L 0900007.7062							
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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviati "LLC."							
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: JUNIO DEFNAL							
Name of New Registered Agent: JUAN DAVID BETNAL New Registered Office Address: 1432 NW 82 BVE							
(Enter Florida street address) Hibri Salzb (City) (City) (Zip Code)							
(ap way							

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 608, 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.

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	mager Managing Member		
<u>Title</u>	Name	Address	Type of Action
NB	JAVIET PAYTOR	1336 NW 84 AV	Add Remove
<u>b</u>	MARIO SEDULUEDA		Add Remove
	· · · · · · · · · · · · · · · · · · ·		AddRemove
		·	Add Remove
			Add Remove
			Add Remove
D. If amendi	ing any other information, enter change(s)	here: (Attach additional sheets, if necessary.)	<u>.</u>
			2010 JAN
Dated	Signature of a member or a	suthorized representative of a member	TARY OF STATE
. –	\\	Ocud Barna/	21 216 216 216

Page 2 of 2