

(F	Requestor's Name)	
(A	Address)	
	Address)	
Ų	ida (CSS)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
•	, ,	
(0	Ocument Number)	·
Certified Copies	Certificates of S	Status

Special Instructions to Filing Officer:

L. SELLERS

SEP 28 2011

EXAMINER

Office Use Only



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09/26/11--01014--010 **30.00



COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	AYSE LO	OGISTICS, LLC	
JOBSECT.		ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	•
Please return all corresp	ondence concerning this matter	to the following:	
		Tim Hangas	
		Tim Hangge Name of Person	
	<u> </u>	Firm/Company	
	10801	Starkey Rd Suite104-102	<u> </u>
		Address	
	;	Seminole, FL 33777	
	, /	City/State and Zip Code	
	E-mail address: (to be used for future annual report not	fication)
For further information	concerning this matter, please of	call:	
, 1	im Hangge	at (727)	667-2386
Name of Person			ne Telephone Number
Enclosed is a check for t	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section		STREET/COUR Registration Secti	HER ADDRESS:
Division of Corporations P.O. Box 6327		Division of Corpo Clifton Building	prations
Tallahassee, FL 32314		2661 Executive C	Center Circle

Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AYSE LOGISTICS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

	(3)		
The Articles of Organization for this Limited	l Liability Company were filed on	05/17/2011	and a	ssigned
Florida document numberL110000				J
This amendment is submitted to amend the f	following:			
A. If amending name, enter the new name	e of the limited liability company	here:		
The new name must be distinguishable and end "L.L.C."	with the words "Limited Liability Co	ompany," the designation '	LLC" or the	e abbreviation
Enter new principal offices address, if app	olicable:		<u> </u>	
(Principal office address MUST BE A STR	EET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. If amending the registered agent an				
registered agent and/or the new registered		on our records, enter	тие наше	of the nev
Name of New Registered Agent:				· · ~
New Registered Office Address:			Y P	31
		Enter Florida street ad	dress 5	Laterale A.
		, Florida		
New Registered Agent's Signature, if changin	City ng Registered Agent:		Zip Co.	7
I haraby account the appointment as registe	ared agant and agree to act in th	is canacity. I further a	wee to cor	anly with

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.

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ben Hoskins	10801 Starkey Rd Suite 104-102 Seminole, FL 33777	Add Remove
MGR_	Paulette DeLucia	10801 Starkey Rd Suite 104-102 Seminole, FL 33777	✓ Add Remove
	<u>. </u>		Add Remove
			Add Remove
			□Add □Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
-		,	_ _
	September 13	2011	_
Dated	,		
	Signature of a n	nember or authorized representative of a member	
		Tim Hangge Typed or printed name of signee	

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Filing Fee: \$25.00