Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIG VELOX CARGO LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

3052201440

ARTICLES OF AMENDMENT

•	ARTICLES OF ORGANIZATION OF
ELOX CARGO LLC	
(Name of	the Limited Lightlifty Company or it now opposes on an

(A Florida L	imited Liability Company)	oras.)
The Articles of Organization for this Limited Liability Con	upany were filed on August 29, 20	11 and assigned
Florida document number L11000099054		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d Hability company berej	
Aringa express.com LLC	a nature company neig.	
The new name must be distinguishable and contain the words "Limite	d Liability Company." the designation "I	LC" or the abbraviation "L.L.C."
Enter new principal offices address, if applicable:	_ <u></u>	
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
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	\$20 to 16 to \$220 \$4 to 14 to 15 to 16 to	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office address.	red office address on our reco	rds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	iress
·		Florida Zin Code
	Clly	Zip Code
New Registered Agent's Signature, if changing Registered	•	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered ages being filed to merely reflect a change in the registered company has been notified in writing of this change.	aplete performance of my duties nt as provided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is
	, ,,,	
	If Changing Registered Agent, Signatu	ire of New Registered Agent

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3052201440

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Gabriel Snavedra Borges Pereira	2051 NW 112h Ave #123	
		Miami, FL 33172	☐ Remove
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D. If ame	nding anv	other information, enter	change(s) here: (Attach additional sheets,	if wanessame)	
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E. Effecti	ive date, if	other than the date of filli isted, the date must be specific as	ng: April 4, 2018	(optional)	
Note;	If the date is	serted in this block does not	meet the applicable statutory filing requirement	ys after filing.) Pursuant to 605.0207 ate, this date will not be listed as	/ (3)(b) ; the
docum	ent's offectiv	ve date on the Department of	State's records.		
If the red (b) The	ord specil 90th day	fies a delayed effective after the record is filed	date, but not an effective time, at 12	:01 a.m. on the earlier o	fi
Doted	April 4		2018		
Daiva		,	-,		
		Signature of	a member of authorized representative of a member		
	Dougla	v Da Silva			
			Typed or printed name of signes		

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