L12000/07358

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PICK-UP	☐ WAIT	MAIL MAIL		
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B. KOHR

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EXAMINER



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SECRETARY OF STATE

COVER LETTER

TO: Registration Division of C	Section orporations	ŕ	
SUBJECT:	Nationwide F	reight Transport LLC	
Sobject.		ited Liability Company	
	of Amendment and fee(s) are sul	_	12 SEP -4 PH 3: 50
Please return all corres	pondence concerning this matter	r to the following:	P
		Shazia Munim	
		Name of Person	ښ س
Nationwide Freight Transport LLC			
		Firm/Company	
367 SW 188 Terrace			
		Address	
	Peml	oroke Pines Florida 33029	
	·	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please of	call:	
	labeel Munim	at (954)	8292172
Name	e of Person	Area Code & Daytir	ne Telephone Number
Enclosed is a check for	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)
Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 thassee, FL 32314	STREET/COUR Registration Section Division of Corporation Building 2661 Executive Control Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nationwide Freight Transport LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 08/27/2012 The Articles of Organization for this Limited Liability Company were filed on L12000107358 Florida document number 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 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 office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida _

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

MGR = Manager

MGRM = M	lanaging Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Nabeel Munim	367 SW 188 Terrace Pembroke Pines, FL 33029	☐ Add ☑ Remove
MGR	Shazia Munim	367 SW 188 Terrace Pembroke Pines, FL 33029	☑ Add ☐ Remove
MGRM	Nabeel Munim	367 SW 188 Terrace Pembroke Pines, FL 33029	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necess	ary.)
Dated	August 30th ,	2012	
	Signature 60a memi	ber of authorized representative of a member	
	Tue	Shazia Munim	

Page 2 of 2

Filing Fee: \$25.00