

L12000129468

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
DEC 14 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZANGEM LOGISTICS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GEORGE SAENZ

Name of Person

ZANGEM LOGISTICS LLC

Firm/Company

2119 NW 79 AVE

Address

DORAL, FLORIDA 33122

City/State and Zip Code

SAENZMIA@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GEORGE SAENZ

Name of Person

at (305) 801-8760

Area Code & Daytime 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 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

FILED
12 DEC 13 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ZANGEM LOGISTIC LLC

(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 10/10/2012 and assigned
Florida document number L120001249468

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)

2119 NW 79 AVENUE

DORAL, FLORIDA 33122

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2119 NW 79 AVENUE

DORAL, FLORIDA 33122

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

City, Florida Zip 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 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>	<u>Address</u>	<u>Type of Action</u>
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MGRM	SAENZ, MARIA GEMMA	2500 NW 79TH AVE STE 263	<input type="checkbox"/> Add
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		DORAL FL 33122	<input checked="" type="checkbox"/> Remove
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MGRM	SAENZ GOMEZ, YOLAND,	2119 NW 79 AVE	<input checked="" type="checkbox"/> Add
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		DORAL, FL 33122	<input type="checkbox"/> Remove
--	--	-----------------	---------------------------------

MGRM	SAENZ, GEORGE	2119 NW 79 AVE	<input type="checkbox"/> Add
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		MIAMI FL 33122	<input checked="" type="checkbox"/> CHANGE
--	--	----------------	--

			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 12/12, 2012.

Signature of a member or authorized representative of a member

GEORGE SAENZ

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00