L12000141092

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COVER LETTER

TO:

Registration Section Division of Corporations



SURIFCT.

OVERSEAS FREIGHT SOLUTIONS 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:

OLGA BENGOCHEA

Name of Person

OVERSEAS FREIGHT SOLUTIONS LLC

Firm/Company

10975 NW 29TH STREET

Address

MIAMI, FL 33172

City/State and Zip Code

OLGA@OVERSEASFWD.COM

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

For further information concerning this matter, please call:

OLGA BENGOCHEA

_{4,7}305,463-7060

Name of Person

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

OVERSEAS FR	REIGHT SOLUTIONS LLC	
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document numberL12000141092	Company were filed on 11/07/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lir</u>	nited liability company here:	
	ı	23
The new name must be distinguishable and end with the words "I	Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C.".
Enter new principal offices address, if applicable:		
		3 1
<u>(Principal office address MUST BE A STREET ADL</u>	<u>ORESS)</u>	23.27
		55. · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		85
(Mailing address MAY BE A POST OFFICE BOX)		
maung dadess may be a root of ree book		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		nter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Floric	ia
	City	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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Olga R. Bengochea	10975 NW 29th Street	Add
		Miami, FL 33172	■ Remove
			<u></u>
MGR	Carlos J. Bengochea Sr.	10975 NW 29th Street	🗆 Add
		Miami, FL 33172	■ Remove
MGR	Olga R. Bengochea Jr.	10975 NW 29th Street	22 24 25 Add ~;
		Miami, FL 33172	Remove Γ
MGR	Carlos J. Bengochea Jr.	10975 NW 29th Street	Add
		Miami, FL 33172	■ Remove
			
MGR	Elizabeth R. Bengochea	10975 NW 29th Street	Add
		Miami, FL 33172	= Remove
			_
MGR	OCEANS CONSOLIDATORS, INC.	10975 NW 29th Street	= Add
		Miami, FL 33172	□ Remove

Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot the date this document is filed by the Florida Department of State)	(optional) not be more than 90 days after
Dated	
Dated Dlpc R. Bergeche Signature of a member or authorized representa	tive of a member

Page 3 of 3

Filing Fee: \$25.00