# <u>L13000105028</u>

Office Use Only



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08/21/13--01006--013 \*\*25.00

AUG 22 2013 J. BRYAN

## **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

# TEMCO LOGISTIC 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:



Name of Person

TEMCO LOGISTIC LLC

Firm/Company

1499 S FEDERAL HIGHWAY

Address

**BOYNTON BEACH** 

City/State and Zip Code

SHEETIAT@GMAIL.COM

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

For further information concerning this matter, please call:

SHEETIAT, NOAM

561, 503-0000 · Area Code & Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fec & 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

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## TEMCO 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 07/24/2013	and assigned
Florida document number L13000105028		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the via "L,L,C,"	vords "Limited Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADd	DRESS)	
	-	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		is, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
•	Enter Florida	street address
<u> </u>		Florida
	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 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>	Name	Address	Type of Action
MGRM	KADURY SHITIAT	1499 S FEDERAL HIGHWAY	, ✓ Add
		BOYNTON BEACH, FL 33435	Remove
			Add
			- Add
		ALLAHASSE	2019 Adus 21
<del></del> -		FLORIDA	Add Remove
			Add Remove
<del>.</del>		·	Add
		·	Remove

D. Ífame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
_		
_		
_		
_		
Dated		
	Signature of a member or authorized representative of a member	
	SHEETIAT, NOAM	
	Typed or printed name of signee	
	Page 3 of 3	22
	Filing Fee: \$25.00	7013 AU

FILED

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SECRETARY OF STATE
ALLAMASSEEL FLORIDA