L140000 68071

(Requestor's Name)
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PICK-UP WAIT MAIL

(Business Entity Name)
(Document Number)
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COVER LETTER

ŤO:	Registration Sec Division of Corp			
OT 110 110		HOME LLC		
SUBJE	CT:	Name of Limi	ted Liability Company	
The enc	losed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please re	cturn all correspor	ndence concerning this matter	to the following:	
		ANTONIO JOSE RAMPA	ZZO NETO	
			Name of Person	
		DIAMONT HOME LLC		
			Firm/Company	
		7320 CYPRESS GROVE I	พ	
			Address	
		ORLANDO, FL 32819		
			City/State and Zip Code	<u>.</u>
		AJRAMPAZZO@GMAIL.		
			o be used for future annual report noti	llication)
For furt	her information ec	oncerning this matter, please ea	ill:	
ANTO	NIO JOSE RAMP	AZZO NETO	407 820-1973 at ()	
	Name of	Person	at ()Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	e 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)
	Registra	ING ADDRESS: ation Section n of Corporations ox 6327	STREET/COUR Registration Section Division of Corpo Clifton Building	on
		ssee, FL 32314	2661 Executive Co	enter Circle

Tallahassee, Fl. 32301



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIAMONT HOME LLC					
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jiability Company)				
The Articles of Organization for this Limited Liability Company Florida document number 1.14000068071	were filed on 04/25/2014 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
LOGAN CARGO SOLUTIONS LLC					
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	7320 CYPRESS GROVE RD ORLANDO, FL 32819				
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7320 CYPRESS GROVE RD ORLANDO, FL 32819				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	Enter Florida street address 014 22 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 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		-	☐ Remove
		-	☐ Change
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		-	☐ Remove
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Effective date, if other than the (If an effective date is listed, the date mus	date of filing: _	6/01/2018		(optional)		
Note: If the date inserted in this bl	ock does not meet	the applicable st	of filing or more than 9 atutory filing require	0 days after filing.) ments, this date v	Pursuant to 60 vill not be lis	5.0207 (: ted as ti
document's effective date on the D	epartment of State	's records.				
the record specifies a delayed) The 90th day after the rec		e, but not an	effective time, at	: 12:01 a.m. c	on the earl	ier of:
ORLANDO, FL	0.	5/29/2018				
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Typed or printed name of signee

Filing Fee: \$25.00

