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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL (
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	,
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COVER LETTER

TO: Registration Section Division of Corporations				
	OGISTICS LLC]		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Article	s of Amendment and fee(s) are sub	mitted for filing.		
Please return all corr	espondence concerning this matter	to the following:		
	ARVANIS VERDECIA			
	<u> </u>	Name of Person	-	
	MGR			
		Firm/Company		
	4633 23TH AVE SW	1		
		Address		
	NAPLES, FL 34116			
		City/State and Zip Co	de	
	INFO@DIRECTSOLUTIO	ONSERVICES.COM to be used for future and	high report notification	un)
For further informati	on concerning this matter, please of		liai report notineatic	ur,
			270 4873	
ARVANIS VERDE		at ()	370-4873	
Na	me of Person	Area Code	Daytime Tele	phone Number
Enclosed is a check t	for the following amount:			
□ \$25.00 Filing Fe	e ■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing F Certified Copy is	/	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	AILING ADDRESS:		EET/COURIER A	ADDRESS:
	gistration Section vision of Corporations	Divis	ion of Corporation	s
	O. Box 6327 Hahassee, FL 32314		on Building Executive Center (Circle
Ta	Handssee, 1 L 32317		hassee, FL 32301	~ .

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

AVA LOGISTICS LLC					
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it n Jiabihity C	ow appears on our records.) Company)		
The Articles of Organization for this Limited L. Florida document number L14000136165		1		and assigne	d
This amendment is submitted to amend the foll	owing:	ŀ			
A. If amending name, enter the new name o	f the limited liabi	ility con	npany here:		
	1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
The new name must be distinguishable and contain the v	vords "Limited Liabil	ity Contp	any, the designation "LLC" or the ab	breviation "L.L.C.	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		18901	NE 14TH AVE		SE
		APT 3	306	۵۵ ب	CZ
		NORT	Г MIAMI BEACH, FL 33179	AZ Z	HA
Enter new mailing address, if applicable:				S PM	35.E.F
				<u></u>	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	- 1		<u> </u>	<u> </u>
					
B. If amending the registered agent and registered agent and/or the new registered o	ffice address here	2:		the name of t	<u>he new</u>
Name of New Registered Agent:	ALEXEY QUI	NTANIL	LA		
New Registered Office Address:	18901 NE 14TH AVE		B. Of the state of		
			Enter Florida street address		
	NORT MIAMI		, Florida 33	179	
		Ciţy		Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:				
I hareby accent the appointment as registere	ed agent and agre	ee to ac	in this capacity. I further as	ree to comply w	ith 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

Page 1 of 3

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>	<u>Address</u>	Type of Action
MGR	ARVANIS VERDECIA	4633 23TH AVE SW	Add
		NAPLES, FL B4116	■ Remove
			Change
MGR	ALEXEY QUINTANILLA	18901 NE 14TH AVE	_ Add
		APT 306	□ Remove
		NORT MIAMI BEACH, FL 33179	□ Change
			Add
			Remove
			Change
			□ Add
			☐ Remove
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fective date, if other than the effective date is listed, the date in	ust be specific and	l cannot be prior to	date of filing or mo	re than 90 days afte	i onal) r filing.) Pursuant to 60	05.02
ote: If the date inserted in this icument's effective date on the	olock does not n Department of S	neet the applicab state's records.	le statutory filing	requirements, thi	is date will not be lis	sted
record specifies a delaye The 90th day after the re	ed effective of cord is filed.	late, but not a	an effective ti	me, at 12:01	a.m. on the earl	ııer
. 01/05/2018		03:30 PM				
ited	2	•	.•			
	Stangature of a s	member or authori.	zed representative	if a member	<u>_</u>	
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Page 3 of 3

Filing Fee: \$25.00