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(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		
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SECRETARY OF STATE

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## **COVER LETTER**

Division of Cor	porations					
	OUP LOGISTIC LLC					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	endence concerning this matter	to the following:				
	QUINTANA, DARD W					
		Name of Person				
		Firm/Company				
	18255 NW 68 AVE 121					
	Address					
	HIALEAH, FL 33015					
	<del></del>	City/State and Zip Code				
	alex@suarez-baster.com			22		
	E-mail address: (	to be used for future annual report notifica	ation)	5	-	
For further information c	oncerning this matter, please ca	ali:		2016 JAN i 1		
QUINTANA, DARD W	, 	786 337-3082	SA MA Ma			
Name of Enclosed is a check for the	of Person	Area Code Daytime To	elephone Number	A II: 5u		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filin Certificate Certified C	of Status	; &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Registration Section

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## STAR GROUP LOGISTIC LLC

company has been notified in writing of this change.

(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 09/05/2014 and assigned Florida document number L14000139395 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 7086 w 29th way Enter new principal offices address, if applicable: hialeah, fl 33018 (Principal office address MUST BE A STREET ADDRESS) 7086 w 29th way Enter new mailing address, if applicable: hialeah, fl 33018 (Mailing address MAY BE A POST OFFICE BOX) 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: RAYMIR D RAMOS DELGADO Name of New Registered Agent: 7086 w 29th way New Registered Office Address: Enter Florida street address HIALEAH 33018 Florida City Ztp Code New Registered Agent's Signature, if changing Registered Agent:  $\triangleright$ 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

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

- 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>	Name	Address	Type of Action
MGR	QUINTANA, DARD W	18255 NW 68 AVE, #121	
		HIALEAH, FL 33015	■ Remove
			Change
MGR	RAYMIR D RAMOS DELGADO	7086 w 29th way	Add
		hialeah, fl 33018	□ Remove
			Change
			Add  Add  Remove
			Changer Add
			Change
			☐ Remove
			☐ Change

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in effective date, if other than the function in effective date is listed, the date must ote: If the date inserted in this blooms	be specific and canr	not be prior to d	ate of filing or	more than 90	days after filing	g.) Pursuar will not	nt to 605.0 The lister
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	Signature of a memi	<u> </u>				· · ·	

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Filing Fee: \$25.00