# 1500016143

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PICK-UP	☐ WAIT	MAIL.
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Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	
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September 22, 2017

MP ACCOUNTING SERVICES INC. MELISSA PALACIOS 5270 GOLDEN GATE PKWY NAPLES, FL 34116

SUBJECT: F&T LOGISTICS, LLC Ref. Number: L15000016143

We have received your document for F&T LOGISTICS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORTATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 617A00019264

Karen A Saly Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, F1, 32301

Periously Sent.

# ARTICLES OF AMENDMENT

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• • • • • • • • • • • • • • • • • • • •	ORGANIZATION 2017
•	OF $\mathcal{C}_{1,2}$
(Name of the Limited/Lisbility Com	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number <u>L   5 000 0</u> . [ (	by were filed on $\frac{1/27/10}{2000}$ and assigned $\frac{1}{2000}$
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	18280 Palm Beach Blvd
(Principal office address MUST BE A STREET ADDRESS)	Alba, FL 33920
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our records, enter the name of the new nere:
Name of New Registered Agent:  New Registered Office Address:  182  Address:	Se Jerena 80 Palm Beach Blud Enter Florida street address  64 Florida 33920  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.

HChapping 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 Type of Action **Title** \_□ Change □ Add □ Remove ☐ Change □ Change □ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove \_□ Change

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Filing Fee: \$25.00