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To:

Division of Corporations

Fax Number : (850) 517-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : I20130000076

: (305)388-7028

Phone Fax Number

: (305)479-2705

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address;

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DBES LOGISTICS LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	DRE2 COCI21 IC2 CCC		
(Name of the Lim	ited 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 on05/21/2015	and assigne	:d
Florida document number L15000090323	•		
This amondment is submitted to amend the fo	lowing:		
A. If amending name, enter the new name	of the limited liability company here:		
N/A			
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."	1
Enter new principal offices address, if appli	cable:	<u> </u>	
(Principal office address MUST BE A STRE	ET ADDRESS)	<del></del>	
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Enter new mailing address, if applicable:		Ϋ́	
(Mailing address MAY BE A POST OFFICE	E ROX)	ū	
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		5	
B. If amending the registered agent and	l/or registered office address on our records, ente		he nev
registered agent and/or the new registered		9	-
Name of New Registered Agent:	N/A		
New Registered Office Address:			
	Enter Florida street address		
	. Florida		
	City.	Zin Coda	

## 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

Title	Name	Address	Type of Action
AMBR	CAROLINA DEL CARMEN CERDA	3910 SPOOBILL AVE	
		ORLANDO, FL 32822	■ Remove
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(Die:	ive date, if other than the date of filing:  09/09/2015  cative date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted	1207 ( l as :
,cum	ent's effective date on the Department of State's records.	
rec	ord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier $90$ th day after the record is filed.	of:
neđ .	09 '09 2015	
	1 The L	
	Signature of a member or sustained representative of a prember	

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