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JUN 15 2015 S. YOUNG

COVER LETTER

Division of Cor	porations	•			
SUBJECT: Germany To		ited Liability Company			
		, , ,			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:	·		
	Miguel Pinzon				
	Miguel I Hizon	Name of Person			
	Germany Tech & Transpor	t LLC Firm/Company			
		rimi/Company			
	1100 S Miami Ave Unit 28	11 Address			
		Address	= 00		
	Miami, FL 33130			; ;	
		City/State and Zip Code			
	teffy08@hotmail.com			12	[1]
	E-mail address: (to be used for future annual report notifi	cation)		[]
For further information c	concerning this matter, please ca	all:		HE H	
Miguel Pinzon		at (404) 246-0009	7 -	T) ==	
	of Person		Telephone Number	_	
Enclosed is a check for t	he 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 I Certificate of Certified Cop (additional copy	Status & y	

MAILING ADDRESS:

, +£\

Registration Section

TÓ:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Germany Tech & Transport LLC (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 June 8, 2015 and assigned Florida document number L15000099681 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." 5 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 3 بې Enter new mailing address, if applicable: (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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Zip Code City

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
MBR	Mrs Maria S Bojaca	1100 S Miami Ave, unit 2811	Add
		Miami, FL 33130	☐ Remove
			■ Change
<u>AR</u>	Omar Said	1100 S Miami Ave, unit 2811	Add
		Miami, FL 33130	■ Remove
			□ Change
			Add
			Remove AHASA D Change FLORES D Add
			Add ⊕ A
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amending i	any other informati	on, enter chan	ige(s) nere: (Allach additione	i sreeis, ii riece	ssary.)	
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	ate inserted in this block fective date on the Dep			e statutory ming r	equirements, tins	date will not be	nsteu as
	pecifies a delayed day after the reco		e, but not a	n effective tim	e, at 12:01 a	.m. on the ea	arlier of
ated	06-11	, <u> </u>	2015				
		_	$\nabla A A / \nabla I$	ed representative of	a member		_
			ia S B				

Page 3 of 3

Filing Fee: \$25.00