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COVER LETTER

Division of Co	rporations		
~	Freight, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Gary Ian Nesbitt, Esq.		
		Name of Person	
	Synergin, LLC		
		Firm/Company	
	4000 Hollywood Boulevar	d, Suite 500-N	
		Address	
	Hollywood, Florida 33021		
	-	City/State and Zip Code	
	ginesbitt@outlook.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	all:	
Gary lan Nesbitt, Esq.		954 966-1820 at ()	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Greenway Freight, LLC	
(<u>Name of the Limited Liab</u> (A Flor	ility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on October 12, 2015 and assigned
Florida document number L15000173478	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
Not Applicable	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	102 Northeast 2nd Street
(Principal office address MUST BE A STREET ADI	DRESS) Boca Raton, Florida 33432
Enter new mailing address, if applicable:	102 Northeast 2nd Street
(Mailing address MAY BE A POST OFFICE BOX)	Boca Raton, Florida 33432
B. If amending the registered agent and/or req registered agent and/or the new registered office ac	gistered office address on our records, enter the name of the new
Name of New Registered Agent: Not	Applicable S
New Registered Office Address:	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registe	1

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>	<u>Address</u>	Type of Action
NA	Not Applicable	Not Applicable	□ Add
			☐ Remove
			Add
			□ Remove
			□ Change
			Add
			☐ Remove ☐ Change
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in effective date is listed, the date must be ofe: If the date inserted in this block	specific and cannot be pri-		more than 90 days after	filing.) Pur		
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red February 12	2016	·				

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Filing Fee: \$25.00