

L15000185218

To: SUNBIZ Page 2 of 6
Division of Corporations

2018-02-20 03:15:39 (GMT) 13055036979 From: INTERSTATE CARRIER SERVICE
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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 617-6385

From:
Account Name : INTERSTATE CARRIER SERVICE CORP
Account Number : 120160000043
Phone : (786) 346-6290
Fax Number : (305) 503-6979

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

Email Address: Interstatecarrier.service@yahoo.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FLORIDA INTER LOGISTICS LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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17 FEB 20 AM 7:50
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. LEGGETT
FEB 20 2018

FILED
18 FEB 20 AM 7:40
STATE OF FLORIDA
TALLAHASSEE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA INTER LOGISTICS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICIA GAUDIOSO

Name of Person

FLORIDA INTER LOGISTICS LLC

Firm/Company

5761 NW 115 CT UNIT 109

Address

DORAL FL 33178

City/State and Zip Code

INTERSTATECARRIERSERVICE@YAHOO.COM

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

LOURDES GARCIA

786 346-6290
at ()
Area Code Daytime Telephone Number

Name of Person

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:
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

FLORIDA INTER LOGISTICS 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 02/15/2018 and assigned
Florida document number L15000185218.

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."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

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:

RODRIGO ENRIQUE VEGA

New Registered Office Address:

5791 NW 116H AVE APT 109

Enter Florida street address

MIAMI

City

Florida 33178

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.


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> | <u>Type of Action</u> |
|--------------|----------------------|---------------------------|--|
| AMBR | DANIEL A GAUDIOSO | 5761 NW 115 CT UNIT 109 | <input type="checkbox"/> Add |
| | | DORAL FL 33178 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | RODRIGO ENRIQUE VEGA | 5791 NW 116TH AVE APT 100 | <input checked="" type="checkbox"/> Add |
| | | MIAMI FL 33178 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

10-10-64
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18 FEB 20 AM 7:40

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated FEB 2 2018

Polsteria pendula

Signature of a member or authorized representative of a member

PATRICIA GAUDIOSO

Typed or printed name of signer