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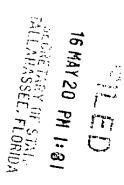
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO		istration Se Ision of Cor			
CII	BJECT:	Smart Way	Transport Systems, LLC		
30	DJEC1:		Name of Lim	ited Liability Company	
The	e enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Ple	ase return	all correspo	ndence concerning this matter	to the following:	
			Pedro Bracho		
				Name of Person	
			Smart Way Transport Syst	ems, LLC	
			•	Firm/Company	
			8667 SW 159th Place		
				Address	
			Miami, Fl 33193		
				City/State and Zip Code	
			info@smartway305.com		
			E-mail address: (to be used for future annual report notific	cation)
For	further in	nformation c	oncerning this matter, please of	all:	
Pec	iro Brach	o		305 3039001 at ()	
		Name o	f Person	Area Code Daytime	Telephone Number
Enc	closed is a	check for th	ne following amount:		
	\$25.00 F	iling 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

Smart Way Transport Systems, LL			
(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I	Liability Company	were filed on Nov 12, 2015	and assigned
Florida document number L15000195905	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name (of the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	8667 SW 159th Place. Miami, Flori	da 33193
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		8667 SW 159th Place. Miami, Fl 33	3193
Mailing address MAY BE A POST OFFICE	(BOX)		
			\
B. If amending the registered agent and	•	· ·	nter the name of the ne
registered agent and/or the new registered o	office address her	<u>e</u> :	A A TO
Name of New Registered Agent:	Pedro Bracho		20 20 E
New Registered Office Address:	8667 SW 159th		FS 2 IT
		Enter Florida street address	2.8 € € € € € € € € € € € € € € € € € € €
	Miami	, Florid	
		City	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>	Address	Type of Action
AMBR	HELEN TERAN	3750 NW 114th Ave. Unit 05. Dora	Add
			■ Remove
			Change
AMBR	PEDRO BRACHO	8667 SW 159th Place. Miami, Fl 33	Add
			Remove
			Change
MGR	Ana Solano	8667 SW 159th Place. Miami, Fl 33	
			Remove
			☐ Change
			
			SEE Remove
			Change
			□ Add
			□ Remove
			□ Change
		Add	
			□ Remove
			Change

Effective date, if other than the date of filing: May 16, 2016 (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	
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	e listed as
The 90th day after the record is filed.	arlier of
Dated May 16 , 2016	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00