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SECRETARY OF STATE

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COVER LETTER

TO:	Registration Se Division of Cor			*	٠ -	_a ze ⁱ t		
SUBJE		GISTICS LLC			•			
.,(),()	, C. (Name of Lim	ited Liability Company					
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please	return all correspo	ndence concerning this matter	to the following:					
		TERRY BRINK						
			Name of Person					
		BRINK LOGISTICS LLC						
			Firm/Company					
		2266 NW 42ND AVENUE	į					
			Address					
		OKEECHOBEE, FL 3497	72					
			City/State and Zip Co	de				
		BRINKLOGISTICS54@G:						
		h-mail address: (to be used for future anni	aal report notifi	cation}	တ္ဆ	20	
For fur	ther information c	oncerning this matter, please co	all:			ΣĠ	20°	-: 2-477
TERR	Y BRINNK		772 at ()	233-5544			2020 JUL 27	,
	Name o	f Person	Area Code	Daytime	Telephone Number	ASSET	<u> </u>	rom.
Enclos	ed is a check for th	ne following amount:				三王	8: 08	
■ S2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing For Certified Copy (additional copy is		Certified (of Status &	&	

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRINK LOGISTICS LLC					
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.16000050143}{1.16000050143}$	were filed on 03/04/2016 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
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 applicable:	2266 NW 42ND AVENUE				
(Principal office address MUST BE A STREET ADDRESS)	OKEECHOBEE, FL 34972				
Enter new mailing address, if applicable:	2266 NW 42ND AVENUE				
(Mailing address MAY BE A POST OFFICE BOX)	OKEECHOBEE, FL 34972				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered				
Name of New Registered Agent:	A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
New Registered Office Address:					
	Enter Florida street address				
	, Florida 元 9				

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.

City

Zip Code

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	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
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fective date, if other than the dat an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Depar	specific and cannot be prior to date does not meet the applicable s	e of filing or more than 90 day	optional) s after filing.) Pursi s, this date will r	uant to 605.0207 tot be listed as
record specifies a delayed effective da is filed.	te, but not an effective time, a	t 12:01 a.m. on the earlier	of: (b) The 90th	n day after the
ated JULY 17	2020			
ated	<i>,</i> , ———			
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Filing Fee: \$25.00