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COVER LETTER

		istration Secti sion of Corpo							
eun irze		ERM TRUCK	SERVICES, LLC						
SUBJEC	1;		Name of Lim	ited Liability Company					
			nendment and fee(s) are sub lence concerning this matter	-					
			Manuel Pineiro						
				Name of Person		· · · · · · · · · · · · · · · · · · ·			
			Firm/Company						
			1750 W 56th Street Sui	W 56th Street Suite 219					
				Address					
			Hialeah, FL 33012	City/State and Zip Code					
			gmfinancialsystemsllc@yahoo.com						
For furthe	er in	formation con	E-mail address: (cerning this matter, please ca	to be used for future annual i all:	report notification)		20 J		
Manuel F	Pine	eiro		305 609 at ()	9-3857		JA427		
		Name of Pe	erson	Area Code	Daytime Telepho		TY OF STAT		
Enclosed i	is a	check for the I	following amount:				— (75)		
■ \$25.0	0 Fi	ling Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl		\$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 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

(<u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our records.) mited Liability Company)		
The Articles of Organization for this Limited Liability Com Florida document number L16000061809	ipany were filed on 03/28/2016	and ass	igned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company here:		
ERM SERVICES USA, LLC			
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the ab	breviation "L.	C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	SS)		
	<u> </u>	<u> </u>	
		0	
Enter new mailing address, if applicable:		14	:
Mailing address MAY BE A POST OFFICE BOX)	1	ال	12:5
		[32] 	
			
3. If amending the registered agent and/or registered of egent and/or the new registered office address here:	ffice address on our records, enter the nam	e of the new	register
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	City	Zio Code	

New Registered Agent's Signature, if changing Registered Agent:

ERM TRUCK SERVICES, LLC

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Anilin Cabrera	1750 W 56th Street	■ Add
		Apt 219	
		Hialeah, FL 33012	□Change
			□Add
			□Remove
			Change
			Remove
			□Change
			□Add
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