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09/21/23--01013--010 **25.00

10/4/2023

COVER LETTER

Division of Corporations
SUBJECT: JEM 1091Stics LCC 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:
EMMANUEL PENA Name of Person
JEM logistics LLC
2445 SR 33
Clermont fl 34714
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JOSE E MUNUZ at (352) 460-8900 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee, Certifica

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

(Name of the Limited L.)	ability Companiorida Limited Lia	y as it now appears (bility Company)	on our records.)	15:10 21 PH 5: 08
The Articles of Organization for this Limited Liabili	ity Company w 74304	ere filed on <u>4</u>	1/14/16	and assigned.
This amendment is submitted to amend the followin	ıg:			
A. If amending name, enter the new name of the	limited liabili	ty company her	<u>e</u> :	
The new name must be distinguishable and contain the words	"Limited Liability	y Company," the des	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable	:	2445	SR 33	3
(Principal office address MUST BE A STREET A)	DDRESS)	Clern	iont, Fl	34714
Enter new mailing address, if applicable:	Δ			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>			
B. If amending the registered agent and/or regist agent and/or the new registered office address he		dress on our rec	ords, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:	E'MM	ANUEL	PenA	
New Registered Office Address:	244	S R Enter Florid	33 la street address	
_	dern	nont	, Florida	34714 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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	EMMANUEL PENA	2445 SR 33	Add
			□Remove
			Change
MER	JOSE E MUNDE	15435 MARKHAM Dr	□Add
		.	Remove
			Change
		-	🗆 Add
			Remove
			Change
			□Add
			□Remove
			□Change
			DAdd
			🗆 Remove
			□Change
			□Add
			🗆 Remove
			□Change

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Note:	ive date, if other than the date of filing: 27 2023 (optional) fective 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). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	9-13.2023
	Signature of a member or authorized representative of a member
	Emmanual Perinted name of signee