LICCO 97051

(R	equestor's Name)	
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SECRETARY OF STALL TALLAHASSEE IT LORE

F.

JUN 0 8 2016 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: LEB LOGISTICS, 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:	
Cleo E Mitchell SR Name of Person	
LEB LOGISTICS LLC Firm/Company	
4133 39th Aves	5 E
St. Petersburg, FL 33711 City/State and Zip Code	TALLAHASSEE TEORE
E-mail address: (to be used for future aimual report notification)	A
For further information concerning this matter, please call:	1:40
CLED E. Mitchell Sr at (813) 420.7995 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee	
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

(Name of the Limited Liability (A Florida	Company as it now appears on our records.) Limited Liability Company)	
		and assigned
		and assigned
Florida document number <u> </u>	51	
Name of New Registered Agent:		
The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number 160009705 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 "LLC." 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) 3. 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:		
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) e Articles of Organization for this Limited Liability Company were filed on		
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRI	ESS)	16 AE
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		T> -1.
		m _
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		74
	· —	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
,	, Florid	I a
	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

Title Name Address Type of Action

MGR Cleo E Mitchell Sr 4133 39^{rg} Ave S

ST. Petersburg, FL 33711

1168	Cleo E Mitchell Sk	4133 34 Ave 5	/2 Add
		5T. Petersburg, FL 33711	
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f an effe Note: - I	date, if other than the date of filing:	
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie Oth day after the record is filed.	r of
	6-6 2016	
Oated _		

Page 3 of 3

Filing Fee: \$25.00