

# L16000100246

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H18000148148 3)))



H180001481483ABC2

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: \_\_\_\_\_

RECEIVED  
2018 MAY 11 PM 4:54  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JB CARGO & LOGISTICS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

FILED  
2018 MAY 11 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

B FIGUEROA

MAY 14 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JB CARGO & LOGISTICS, LLC

(Name of the Limited Liability Company as it now appears on our records) (A Florida Limited Liability Company)

FILED 2018 MAY 11 AM 9:52 SECRETARY OF STATE TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/23/2016

and assigned

Florida document number L16000100246

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

2101 JOHNSON STREET

(Principal office address MUST BE A STREET ADDRESS)

SUITE 110

PEMBROKE PINES, FLORIDA 33029

Enter new mailing address, if applicable:

2101 JOHNSON STREET

(Mailing address MAY BE A POST OFFICE BOX)

SUITE 110

PEMBROKE PINES, FLORIDA 33029

B. 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:

MARTORELL'S OFFICE GROUP CORP

New Registered Office Address:

11046 WEST FLAGLER STREET

(Enter Florida street address)

MIAMI

Florida 33174

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.

Handwritten signature of the new registered agent.

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	BUZNEGO, ESCOBAR, IBRAHIM J	21011 JOHNSON STREET	<input type="checkbox"/> Add
		SUITE 110	<input type="checkbox"/> Remove
		PEMBROKE PINES, FL 33029	<input checked="" type="checkbox"/> Change
MGR	JAUCH GARCIA, MARIA E	21011 JOHNSON STREET	<input type="checkbox"/> Add
		SUITE 110	<input type="checkbox"/> Remove
		PEMBROKE PINES, FL 33029	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 MICHAEL HAMMERS  
 11 AM 05/22

