Division of Corporations Electronic Filing Cover Sheet

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	Division of Co	rporations	PM*	
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From:				
	Account Name	: LEGALZOOM.COM	INC.	
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	Phone	: (323)962-8600		53 m
	Fax Number	: (323)962-3889		
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anr	ual report maili	ings. Enter only	one email address please.**	Tree B
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BUTLER EXPRESS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	. 05
Estimated Charge	\$55.00

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## **COVER LETTER**

TO: Registratio Division of	n Section Corporations
SUBJECT: BUTL	ER EXPRESS, LLC
SUBJECT:	Name of Limited Liability Company
	to the state of th
The enclosed Article	s of Amendment and fee(s) are submitted for filing.
Please return all corn	espondence concerning this matter to the following:
	Cheyenne Moseley
	Name of Person 3.
	Legalzoom.com, Inc.
	Firm/Company
	101 N. Brand Blvd 11th Floor
	Address
	Glendale, CA 91203
	City/State and Zip Code
	management@butlercarriers.com  E-mail address: (to be used for future annual report notification)
For further information	on concerning this matter, please call:
CHEYENNE MOS	SELEY 800 773-0888 ext. 9724
Nar	ne of Person Area Code Daytime Telephone Number
Enclosed is a check for	or the following amount:
□ \$25.00 Filing Fee	Certificate of Status  □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  □ \$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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUTLER EXPRESS, LLC	203		
(Nume of the Limited Liability Comp (A Florida Limited	pany as it now appears on o Liubility Company)	ur records.)	
The Articles of Organization for this Limited Liability Company	y were filed on <u>06/15/2</u>	016 and assigned	
Florida document number <u>L16000115652</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here:		
Traffic and Logistics USA, LLC			
The new name must be distinguishable and end with the words "Limited Lie	ability Company," the design	ation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
	adir apa		,Cos
	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		S S S	
		SE-	
	-a\		
B. If amending the registered agent and/or registered e	office address on our	records, enter Hie name of the ne	<u>:W</u>
registered agent and/or the new registered office address he	<u>re</u> :	© N - <b>6</b>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
-		, Florida	
	City	Zip Cocke	

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

I hereby accept the appointment as registered agent and agree to actin 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

MGR≈ Manager

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
		<del>-</del> 			
(The effective the date this	late, if other than the date of filing:  date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)				
Datedł	Signators of a member of authorized representative of a member	76	-		
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Filing Fee: \$25.00