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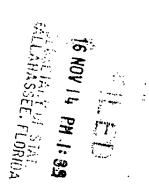
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Computer Logistic Services, UC.
A Lastan Capitago 114
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Antonio MATES, JR.
Computer Logistic Services, LLC.
Firm/Company
4462 NW 74th Ave
Miemi, FL 33166
City/State and Zip Code
F-mail didress: (to be used for future annual report notification)
Hntonio MATOS, Ja at (786) 412 0314
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee,
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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**

Computer Logistic	Services, LLC.
(Rame of the Limited Liability Compa (A Florida Limited	Services, LLC. any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000123122</u> .	, Inaly
This amendment is submitted to amend the following:	·
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4462 NW 74th AVE MIAMI, FL 33166
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4462 NW 74th AVE
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new
Name of New Registered Agent: New Registered Office Address: 4462	NW 74 th AVE Enter Florida street address , Florida 33166
<u> Miami</u>	, Florida 33166 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

MGR = M AMBR = A	anager uthorized Member		
<u>Γitle</u>	Name	Address 4462 NW 74th AVE. MIAMI, FL 33166	Type of Action
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	ive date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)	D.	(05	. 0202 (2)
fect	If the date inserted in this block does not meet the applicable statutory filing requirements, this date	will not	be list	ed as the
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Page 3 of 3

Filing Fee: \$25.00