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COVER LETTER

TO:				
SUBJE		OBAL TRANSPORT LLC		
SUBJE	ui:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The encl	losed Articles of	f Amendment and fee(s) are sub	. mitted for filing.	
			•	
		Margarita Martin		
			Name of Person	
		Name of Person TAX MEDIC CORPORATE SERVICES LLC Firm/Company 7911 NW 72ND AVE SUITE 223A Address MEDLEY FL 33166 City/State and Zip Code TAXMEDICRELIEF@GMAIL.COM E-mail address: (to be used for future annual report notification) Information concerning this matter, please call: DIAZ JR Name of Person Taxmedia address: (to be used for future annual report notification) Area Code Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32314 Address Address Address Lity/State and Zip Code Taxmedia Tip		
			Firm/Company	Telephone Number \$60.00 Filing-Fee, Certificate of Status & Certified Copy (additional copy is enclosed) CR ADDRESS: tions ter Circle
		7911 NW 72ND AVE SU	ITE 223A	
			Address	
		MEDLEY FL 33166		
	,	TAXMEDICRELIEF@GM	1AIL.COM	
For furti	her information		•	cation)
ERNES	TO DIAZ JR			
	Name	of Person		Telephone Number
Enclose	d is a check for	the following amount:		
\$25.	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy S
••				ر سرتو فيابر
	Regis Divisi P.O. I	tration Section ion of Corporations Box 6327	Registration Section Division of Corpora Clifton Building	tions ater Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A & A GLOBAL TRANSPORT LLC

(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Comparing document number <u>L16000140729</u> .	any were filed on <u>07/27/2016</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	2	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered registered agent and/or hor registered agent and/or hor registered office address h	l office address on our records, enere:	16 SEP - S OF STATE NATURAL AND A SEEF FLOOR
Name of New Registered Agent:		·
New Registered Office Address:	Enter Florida street address	
	•	ia
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DIAZ, ERNESTO, JR	10315 NW 9ST CIR	■ Add
		APT 201	□ Remove
		MIAMI FL 33172	Change
P	DIAZ, ERNESTO, JR	10315 NW 9ST CIR	
		APT 201	Remove
		MIAMI FL 33172	Change
			Add
			Remove
			Change
			Add
			Remove ALCO Ghange HASSE
			Change
			□ Add
			□ Change

_	PLEASE ALSO INCLUDE THE EIN # 81-3401521
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Effecti	ve date, if other than the date of filing: 08/09/2016 (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.) Pursuant to 605.020
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
iocum	ent's effective date on the Department of State's records.
e rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
The	90th day after the record is filed.
	august 9th, 2016.
Dated .	
Dated .	
Dated .	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00