

L16000165624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

OCT 18 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B&T Global logistics LLC
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:

Nestor J Tortolero

Name of Person

Firm/Company

2149 Arrowgrass DR Unit 107

Address

Wesley Chapel FL 33544

City/State and Zip Code

BNT.logistics403@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nestor J Tortolero

Name of Person

at (813)

Area Code

428-4675

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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16 OCT 17 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

B & T Global Logistics LLC

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

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 02, 2016 and assigned Florida document number L16000165624.

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)

2149 ARROWGRASS DR UNIT 107
Wesley Chapel FL, 33544

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2149 ARROWGRASS DR UNIT 107
Wesley Chapel FL 33544

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:

New Registered Office Address:

Enter Florida street address

Florida

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Nestor J Tortolero	2149 Arrowgrass Dr	<input checked="" type="checkbox"/> Add
		Unit 107 Wesley Chapel	<input type="checkbox"/> Remove
		Fl. 33544	<input type="checkbox"/> Change
AMBR	Angel F Blasco	2149 Arrowgrass Dr	<input checked="" type="checkbox"/> Add
		Unit 107 Wesley Chapel	<input type="checkbox"/> Remove
		Fl. 33544	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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OCT 17 9 27
RECORDS SECTION
MILWAUKEE, WIS.

[illegible]

(If an effective 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Nestor J Tortolero

Typed or printed name of signee

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STATE
SECRETARY OF
LOUISIANA
TALLAHASSEE