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To:

Division of Corporations
Fax Number : (850) 617-6983

From:

Account Name : TAXLEAF.COM INC
Account Number : 120140000084
Phone : (305) 541 3980
Fax Number : (888) 772-8108

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

Email Address: _____

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SNS FREIGHT LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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JUL 03 2017

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

SNS FREIGHT 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 9/22/2016 and assigned Florida document number L16000177891.

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 end with the words "Limited Liability 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)

401 N PARSON SUITE 107A
BRANDON FL 33510

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

401 N PARSON SUITE 107A
BRANDON FL 33510

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:

401 N PARSON SUITE 107A

Enter Florida street address

BRANDON

Florida

33510

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

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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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LANDIVAR, SALVADOR	10860 NW 138ST	☐ Add
		MIAMI, FL 33018	☒ Remove
MGR	LANDIVAR, SALVADOR	401 N PARSON SUITE 107A	☒ Add
		BRANDON FL 33510	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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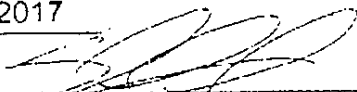
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specified, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State.)

Dated JUNE 28TH, 2017



Signature of a member or authorized representative of a member

SALVADOR LANDIVAR

Typed or printed name of signer

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