

L16000195931

(Requestor's Name)

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(City/State/Zip/Phone #)

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FILED
CLERK OF COURT
JANUARY 10, 2017

NOV 22 2016
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: UNITED BROTHERS 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:

MAZEN SHBIB

Name of Person

Firm/Company

1555 STATE ROAD 436 SUITE 1191

Address

FL/
WINTER PARK 32792

City/State and Zip Code

polandt909@gmail.com

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

For further information concerning this matter, please call:

MAZEN SHBIB

321 304-1285

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
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**

UNITED BROTHERS 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 10/24/2016 and assigned
Florida document number L16000195931.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: MAZEN SHBIB

New Registered Office Address: 1555 STATE ROAD 436 SUITE 1191

Enter Florida street address

WINTER PARK, Florida 32792

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.

MAZEN SHBIB

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>
PRES	MAZEN SHBIB	1555 STATE ROAD 436	☐ Add
		SUITE 1191	☐ Remove
		WINTER PARK, FL, 32792	☒ Change
PRES	MOHD BASSAM CHBIB	1555 STATE ROAD 436	☐ Add
		SUITE 1191	☒ Remove
		WINTER PARK, FL, 32792	☐ Change
VPRE	MAISA ELWARI	1555 STATE ROAD 436	☐ Add
		SUITE 1191	☒ Remove
		WINTER PARK, FL, 32792	☐ Change
MGR	MOUHANNAD SHBIB	1555 STATE ROAD 436	☐ Add
		SUITE 1191	☒ Remove
		WINTER PARK, FL, 32972	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

1. THE MEMBER MAZEN SHBIB CHANGE FROM MGRA TO PRESIDENT

2. ALL OTHER MEMBER GET REMOVED FROM THE COMPANY

E. Effective date, if other than the date of filing: NOV 11, 2016 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated NOV 11, 2016.

Signature of a member or authorized representative of a member

MAZEN SHBIB

Typed or printed name of signee