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Marcus S. Kostolich				
·	Name of Person	÷		
	FBR Logistics Holdings LL	c		
·\$*	Firm/Company			
	10145 Blazed Tree Court			
	Address			
	Orlando, Florida 32821-827	72		
	City/State and Zip Code			
	marc1943@gate.n			
E-mail addr	ess: (to be used for future annual rep	port notification)		
For further information concerning this matter, plea	ise call:			
Marcus S. Kostolich	at	(407) 264.9726		
Name of Person	Area Code	Daytime Telephone Number		
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\$30.00 Filing Fee & Certificate of Statu	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS:	STREET/C	COURIER ADDRESS:		

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 40v.17, 2016 on

Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Food by Rail Logistics Holdi	ngs LLC
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)	W/A
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	nddress on our records, <u>enter the name of the new</u> <u>registered</u>
Name of New Registered Agent:	N/A = ===
New Registered Office Address:	MA Enter Florida street address
, Florida	A City Zip Code
N. Best and Great and Great and Assault	

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

Page 1 of 3

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

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
			Add
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	fective date, if other than the date of filing:	filing.) Pursuant to 605.0	
The 9	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. 0th day after the record is filed.	on the earlier of:	(b
Da	ted March 22,2017	1 第 1	l •
	Signature of a member or authorized representative of a member MARCUS S, KOSTOLICH Typed or printed name of signee	100 T	1

Page 3 of 3 Filing Fee: \$25.00