L17000028533

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | <u> </u> |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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03/06/17--01012--003 **25.00



D. SCOTT MAR. 7 2017

COVER LETTER

| OUD ID OF | INTER CONTINE | ENTAL TRANSPORTATIO | N LLC | |
|-----------------------------|--|---|---------------------------|--|
| SUBJECT: | Name of Li | mited Liability Company | | |
| The enclosed Articles | of Amendment and fee(s) are su | ibmitted for filing. | | |
| Please return all corre | spondence concerning this matte | er to the following: | | |
| | | SHELDON SERRAO | | |
| | | Name of Person | | _ |
| | INTE | R CONTINENTAL TRANSPO | PRTATION LLC | |
| | . | Firm/Company | | _ |
| | | 10914 NW 33RD ST. #112 | | |
| | | Address | | |
| | | DORAL, FL 33172 | | |
| | | City/State and Zip Code | | - |
| | F-mail address | sheldon.serrao@ictcshipping.c : (to be used for future annual re | | 10000000000000000000000000000000000000 |
| For further informatio | n concerning this matter, please | | port notification) | TILEU RELARGES |
| Sheldon | Serrao | * at (954) | 551-1283 | |
| Nam | e of Person | Area Code | Daytime Telephone Number | er 700 2 |
| Enclosed is a check fo | r the following amount: | | | |
| ■ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclo | Certific sed) Certifie | ate of Status & |

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

INTER CONTINENTAL TRANSPORTATION LLC

| (Name of the Limited Liability Company as it | now appears on our records.) | |
|---|--|--|
| (Name of the Limited Liability Company as it (A Florida Limited Liability | Company) | |
| The Articles of Organization for this Limited Liability Company were to | Tiled on02/28/20 | and assigned |
| Florida document numberL17000028533 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability co | ompany here: | |
| The new name must be distinguishable and contain the words "Limited Liability Con | npany," the designation "LLC" o | r 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: | | S |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| B. If amending the registered agent and/or registered office a | ddress on our records, | enter the name of the ne |
| registered agent and/or the new registered office address here: | | 75.5 3. |
| N. CN. D. C. LA | | 97 P |
| Name of New Registered Agent: | · | |
| New Registered Office Address: | Enter Florida street address | |
| | | J., |
| Ci | | da Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | |
| I hereby accept the appointment as registered agent and agree to a provisions of all statutes relative to the proper and complete performaccept the obligations of my position as registered agent as provid being filed to merely reflect a change in the registered office address. | rmance of my duties, and . ed for in Chapter 605, F.S | I am familiar with and S. Or, if this document is |

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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> | Type of Action |
|--------------|-----------------|-----------------------------------|-------------------------|
| MGR | YABEL MARTIN | 757 W. 32nd St. Hialeah, FL 33012 | <u>⊠</u> Add |
| | | | Remove |
| | | | □ Change |
| MGR | ENRIQUE ESTRADA | 2181 SW 89th Ave Miami, FL 33165 | ⊠ Add |
| | | *** | Remove |
| | | | ☐ Change |
| | | | Add |
| | | | □ Remove |
| | | | Change |
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| | | | Removen |
| | | | Ch ạn ge |
| | | | ्रिंच ध □ Add |
| | | | □ Remove |
| | | | Change |
| | | | |
| | | | □ Remove |
| | | | ☐ Change |

| ii amending | any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|--|---|
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| f an effective da Note: If the d | te, if other than the date of filing: |
| | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o day after the record is filed. |
| Dated | February 21st. 2017 |
| | |
| | Signature of a member or authorized representative of a member |
| | |
| | SHELDON SERRAO Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00