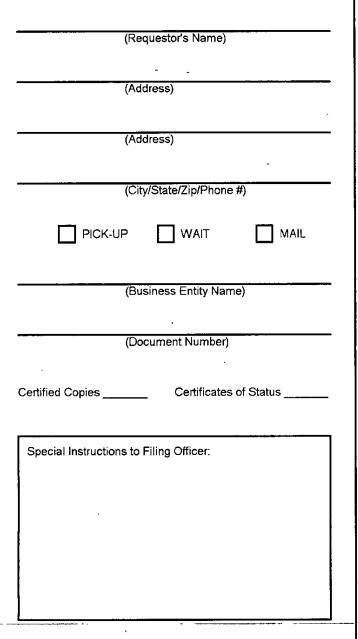
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Office Use Only

# **COVER LETTER**

TO:	Registration Section Division of Corpor	n ations	gr <sup>e</sup> v	, ,		
SUBJE	ст:Н	AVANG LOG	Limited Liability Company			
The en	closed Articles of Am	endment and fee(s) are	submitted for filing.			
Please	return all corresponde	nce concerning this ma	atter to the following:			
			Name of Person	ORAL	22.	
			HAUGINA LA	ogistic	, HC	
	٠.	4630	Firm/Company Cypners Ruien Address			
			City/State and Zip Coo	hL te	34772.	
	-	Hevar E-mail addre	un Logistics @	Yahoo	Wrr -	
For fur	ther information conc	erning this matter, plea	se call:			
	Name of Pe	mu ralez	at ( <u>40+</u> ) Area Code	284-	e Telephone Number	
Enclos	ed is a check for the fo	ollowing amount:				
× 52.	5.00 Filing Fee (	330.00 Filing Fee & Certificate of Statu			□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose	

### 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

<u>Havana</u> l	1.31163
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on 68-09->01+_ and assigned
Florida document number <u>11700029</u> 02	<u>G</u> .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ted liability company here:
	"Same"
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	"Same"
(Principal office address MUST BE A STREET ADDR	ESS)
Enter new mailing address, if applicable:	"Same"
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, enter the name of the new ess here:
Name of New Registered Agent:	
New Registered Office Address:	"Same" Fo
	Enter Florida street address
	City , Florida 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 Anature 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 = Mana AMBR = Auth			
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
President	Nancy moralez	4630 Cypness hive Rol	D Add
		St cloud F1 34772	□ Remove
	Reason 3	4630 Cypners Rue Rol St cloud Fil 34772 LLC-lan 4 Howe GEO JOI BANK	ACCOUNT OPENING
	·		Add
			Remove
			Change
	,		Add
			□ Remove
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			_□ Remove
			Change

.If amending	any other inforn	ıation, enter	change(s	) here: <i>(Att</i>	ach additio	nal sheets, ij	f necessa	ry.)		
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(If an effective da Note: If the d	re, if other than the tast is listed, the date nate inserted in this ffective date on the	iust be specific i block does no	and cannot b t meet the	e prior to date applicable st	of filing or mo	re than 90 day	optional s after filin s, this dat	g.) Pursu	ant to 60 ot be lis	05.0207 ( sted as t
	pecifies a delay day after the re			ut not an e	effective ti	me, at 12:	01 a.m	on th	e ear	lier of:
Dated <u>C</u>	01-201	7 June 1	A 2	217 :	$\bigcirc$	0				
<del></del>		Signature of	a member o	eccy r authorized r	epresentative	of a member				
			Nan	ay n	ONA Le of signee	2.				

Page 3 of 3

Filing Fee: \$25.00