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10:13:46 a.m. 02-28-2018

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3/1/2018

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC
Account Number : I20150000889
Phone : (305)444-8800
Fax Number : (305)444-4010

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WAY TRUCKING LLC

Certificate of Status	0
Certified Copy	0
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S. WARREN

MAR 01 2018

(H580000683813)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Way Trucking 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 02/27/2017 and assigned Florida document number L17000045024

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: WORLDWIDE CORPORATE ADMINISTRATORS LLC

New Registered Office Address: 2330 PONCE DE LEON BLVD

Enter Florida street address

CORAL GABLES, Florida 33134

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.

Signature of Janice Cayton

If Changing Registered Agent, Signature of New Registered Agent

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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>
MGR	Bianca Porto	5837 Caymus Loop	<input checked="" type="checkbox"/> Add
		Windermere, FL 34786	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Guilherme Cavalcante Ribeiro	2330 Ponce de Leon Blvd	<input checked="" type="checkbox"/> Add
		Coral Gables, FL 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joao Paulo Porto	5837 Caymus Loop	<input checked="" type="checkbox"/> Add
		Windermere, FL 34786	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Bianca Porto	5837 Caymus Loop	<input type="checkbox"/> Add
		Windermere, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ICON EQUITY LLC	2330 Ponce de Leon Blvd	<input type="checkbox"/> Add
		Coral Gables, FL 33134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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