

L17000066632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

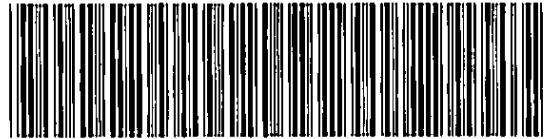
(Business Entity Name)

(Document Number)

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10/19/18--01015--019 **25.00

FILED
2018 OCT 19 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FL

Amended
(0.30.18)
LTS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SILK ROAD 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:

SHAKHRUKH ATABAEV

Name of Person

SILK ROAD LOGISTICS LLC

Firm/Company

14856 CALUSA PALMS DR

Address

FORT MYERS, FL 33919

City/State and Zip Code

shukhrat_ak@yahoo.com

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

For further information concerning this matter, please call:

SHAKHRUKH ATABAEV

239 900-6116
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

FILED

2018 OCT 19 PM 3:09

SILK ROAD LOGISTICS LLC

~~(Name of the Limited Liability Company as it now appears on our records)~~
(A Florida Limited Liability Company)

REPUBLIC OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 03/23/2017 and assigned
Florida document number 117000066632.

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 "LLC."

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:

New Registered Office Address:

Enter Florida street address

Florida

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.

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>
MGR	SHUKHRAT AKHMEDJANOV	5640 CHELSEY LN, #204	<input checked="" type="checkbox"/> Add
		FORT MYERS, FL 33912	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SHAKHRUKH ATABAEV	14856 CALUSA PALMS DR	<input type="checkbox"/> Add
		FORT MYERS, FL 33919	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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)

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.

S. A. A. A. A.
Signature of a member or authorized representative of a member

Typed or printed name of signee