L17000116329

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COVER LETTER

TO:	Registration So Division of Co	ection rporations		
	LTC GLOI	BAL EOGISTICS, LLC		•
SUBJE	CT:			
	si	Name of Lin	nited Liability Company	•
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		LUIS FERNANDO FIAN	()	
			Name of Person	
		LTC GLOBAL LOGISTIC	CS, LLC	
			Firm/Company	
		8000 NW 29TH ST	,	
			Address	·
		DORAL, FL 33122		
		LUISFERNANDOFIANO	City/State and Zip Code @GMAH_COM	
		E-mail address; (to be used for future annual report notifi	ication)
For furth	ner information c	oncerning this matter, please c	all;	
	GELA MOCO		786 7174607	
	Nume o	f Person	at ()	Telephone Number
Enclosed	l is a check for th	ne following amount:		
□ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LTC GLOBAL LOGISTICS, LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000116329</u>	were filed on 05/25/201	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The gam page and by Edinal Arkland and the state of the s			
The new name must be distinguishable and contain the words "Limited Liabi		LC" or the abbreviation "L.1,.C"	
Enter new principal offices address, if applicable:	8000 NW 29TH ST		
(Principal office address MUST BE A STREET ADDRESS)	DORAL, FL 33122		
		702 -138	
Enter new mailing address, if applicable:	8000 NW 29TH ST	DOCT I	
(Mailing address MAY BE A POST OFFICE BOX)	DORAL, FL 33122	V	
The state of the s			
D. 16		့ ယူ	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new registe	
Name of New Registered Agent:			
New Registered Office Address:			
Hew Regissered Office Fiduless.	Enter Florida street address		
	, I	Florida	

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 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
MGR	ROSANGELA MOCO	460 NE 28TH ST UNIT 4203, MIAMEFL 33137	
			□Add
			Remove
			□Change
			□Add
			□Remove
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(If an et Note:	fective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
the recordis fi	d 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 led.
Dated	OCTOBER, 08 . 2020
	Signature of a member or authorized represent inscrot a member
	Luis Fernando Fiano

Filing Fee: \$25.00