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J. HARRIS

COVER LETTER

TO:	Registratio Division of	on Section ' Corporations
SUBJE		ED WAREHOUSE AUTOMATION LLLC
SUBJE	C1;	Name of Limited Liability Company
The encl	losed Article	es of Amendment and fee(s) are submitted for filing.
Please re	turn all corr	respondence concerning this matter to the following:
		Ivette Ruiz
		Name of Person
		IR Professional Services Inc
		Firm/Company
		12150 SW 128 Court Suite 231
		Address
		Miami, FL 33186
		City/State and Zip Code
		irservices@bellsouth.net
		E-mail address: (to be used for future annual report notification)
For furth	er informatio	on concerning this matter, please call:
Ivette Ru	ıiz	305 206-4495 at ()
	Nar	me of Person Area Code Daytime Telephone Number
Enclosed	is a check fo	or the following amount:
\$25.0	00 Filing Fee	E S30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

UNITED WAREHOUSE AUTOMATION LLLC

(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 07/24/2017 _____ and assigned Florida document number L17000156917 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: UNITED WAREHOUSE AUTOMATION LLC 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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 = N $AMBR = N$	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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Typed or printed name of signee	Signature La member or authorized representati	ve of a member			
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Page 3 of 3	Signature of a member or authorized representation of the second of the			<u>.</u> 57	

Filing Fee: \$25.00