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COVER LETTER

SUBJEC[r: <u>Abso</u>	lute Expedite	ors LLC	
Division of Corporations SUBJECT: Absolute Expeditors 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: Heather Arnett Name of Person Absolute Expeditors LLC Firm/Company 1138 Liberty hall or. Address Kissimmer Fl. 34746 City/State and Zip Code Absolute Expeditors Expeditors Expeditors expenses for future annual report notification) For further information concerning this matter, please call: Heather J Arnett at (321) 443 - 6981 Name of Person Name of Person Dayrime Telephone Number				
The enclo	sed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please reti	arn all correspond	ence concerning this matter	to the following:	
		Heather	Arnott Name of Person	
	Rect: Absolute Expeditors LLC Name of Limited Liability Company reloaded Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Heather Arnett Name of Person Absolute Expeditors LLC Firm/Company 1138 Liberty hall dr. Address Kissimmer F1. 34796 City/State and Zip Code Absolute. Expeditors Cyahoo. Com Remail address: (to be used for future unhual report notification) ther information concerning this matter, please cull: 1. 34. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
		1138 Lib	ety hall br.	
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		Absolute. E	> peditors @ yahoo. Co	fication)
For furthe	r information con	cerning this matter, please ea	all:	
Hea	other J	Hansh	at (321) 443 -	6981
	Name of P	erson	Area Code Dayiim	e Telephone Number
Enclosed i	is a check for the	ollowing amount:		
\$25,00) Filing Fee	~	Certified Copy	Certificate of Status &

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

Absolute Ex	peditors LLC	re goode)		
(A Florida	Company as it now appears on or Limited Liability Company)	ir records.)		
		5-2017	and assigned	
Florida document number <u>L17006188845</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company here:			
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designat	ion "LLC" or the abbr	eviation "L.L.C."	
Enter new principal offices address, if applicable:				
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)				
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Enter new mailing address, if applicable:			- 19	_
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Mailing address MAY BE A POST OFFICE BOX)		·	B	_
		records, enteratl		nev
registered agent and/or the new registered office addr	ess nere:	14 cm 2 cm	r t	
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida str	and and drawn or		_
	r.mer r toriad stre			
	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, 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 = N \\ AMBR = A $	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
M6.R	John R. Raptis	1138 Liberty hall dr. Kissimmee FL. 34746	为 Add
		KISSIMMER FL. 34746	Remove
			Change
MGR	JAMES M. AINEH	· ·	
		Kissimmer, FL. 34746	□ Remove
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d 2) . 2017.) Pursuant to 605.0 will not be listed	it to 605.0. be listed
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Signature of a member or authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00