L17000 197092

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2023 APR 20 PH W 24

COVER LETTER

	egistration Se vision of Cor			
41.00	Minor Logi	istics LLC		
SUBJECT	:	Name of Lin	nited Liability Company	 -
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retur	rn all correspo	ondence concerning this matter	to the following:	
		Mara Minor		
			Name of Person	
		Minor Logistics LLC		
			Firm/Company	
		607 Arbequina Court		
			Address	
		Plant City, Florida 33566		2003 APR 20 SERVE MA
			City/State and Zip Code	
		operations@minorlogistics.		
For further	information c	E-mail address: (oncerning this matter, please o	to be used for future annual report notification)	
Mara Mino	r		863 272-5104	111 #2
	Name o	f Person	Area Code Daytime Telephone Nu	imber
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee. tificate of Status & tified Copy titional copy is enclosed)
	ailing Addres		Street Address: Registration Section	
Di	ivision of C	Corporations	Division of Corporations	
	O. Box 632 ıllahassee, I		The Centre of Tallahassee 2415 N. Monroe Street, Su	ite 810
1.0	ariuruggee, l	·	2-10 14. MOINGC BUCCL, 50.	010

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan)	rears on our records.) y)
The Articles of Organization for this Limited Liability Company were filed on	03-01-2022 and assigned
Florida document number L17000197092	
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	ne designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	20 S
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	77
B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here: Name of New Registered Agent:	r records, <u>enter the name of the new reg</u> i
New Registered Office Address:	
	Florida street address
	. Florida

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

Zip Code

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>	Name	Address	Type of Action
MGR	Kirlitha Johnson	8270 Woodland Center Boulevard Suite 0208	
		Tampa, Florida 33614	■Remove
			□Change
			□Add
			Remove
			□Change
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fective date, if other than the	date of filing:	(optional)
an effective date is listed, the date must ote: If the date inserted in this blo	be specific and cannot be prior to date of filing o sek does not meet the applicable statutory fi	or more than 90 days after filing.) Pursuant to 605.020 iling requirements, this date will not be listed a
ocument's effective date on the De	partment of State's records.	
		on the earlier of the The Ooth day ofter the
manard amonifican a dalacted affecting		m. On the carrier of. (b) The soul day after the
	edate, but not an effective time, at 12:01 a.i	
is filed.		
l is filed.		
ated February 20	, 2023	
record specifies a delayed effective is filed. ated February 20		tive of a member