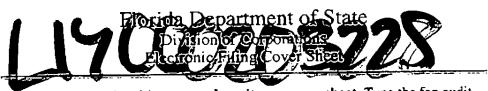
Division of Corporations



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	Division of Corporations	***
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From:	TANK TANK TANK	RNATIONAL IN
	Account Name : CORPORATE CREATIONS INTE	
	Account Number : 110432003053	
	Phone : (561)694-8107	
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CARIBBEAN SHIPPING AND TRADING LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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## ARTICLES OF AMENDMENT TO TARTICLES OF ORGANIZATION OF

	Cirv	, Florida	Zip Code		
TAN INDIVIDUAL WINDOWS	Enter Florida street o				
New Registered Office Address:	·				
Name of New Registered Agont:		· · · · · · · · · · · · · · · · · · ·	21		
registered agent and/or the new registered office address her	<u>rē</u> :	:	ά	.,.	
B. If amending the registered agent and/or registered of	office address on our rec	ords, <u>enter th</u>	e name of	the ne	
		<u></u>		 : 1	
(Mailing address MAY BE A POST OFFICE BOX)				<del></del> -;	
Enter new mailing address, if applicable:		7.21	2317 0	<u>,</u>	
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>			
Enter new principal offices address, if applicable:	·				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "	LLC" or the abbrev	riation "L.L.C	Я	
A. If amending name, enter the new name of the limited that	ility company bere:				
This amendment is submitted to amend the following:					
Florida document number L17000203228					
e Articles of Organization for this Limited Liability Company were filed on 10/02/2017			and assigned		
Caribbean Shipping and Trading LLC  (Name of the Limited Limitly Compa (A Florida Limited I	ny as it now appears on our rec	ords.)	<del></del>		

New Recistered 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:

Title	Name	Address	Type of Action
MGR	GILDA RUBIO	3340 SE FEDERAL HWY #287	
		STUART, FL 34997	Remove
		3340 SE FEDE AL HWY #287	Change
MGR	Jaime Garcia	STUART, FL 34997	<b>=</b> Add
		3340 SE FARETAL HWY #287	Remove
		Stuart FL 34997	Change
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Page 3 of 3 Filing Fee: \$25.00