## U80006 22676

(Requ	uestor's Name)	
(Addr	ess)	
(Addi	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Na	me)
(Doci	ument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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SECRETARY OF STATE

## COVER LETTER

TO:	Registration Division of C			
SUBJ	FCT·	DINAMICS	CARRIERS LLC	
3003	EC1	Name of Lim	ited Liability Company	
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
The er	nclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please	return all corres	pondence concerning this matter	to the following:	
			ALAN MARTINEZ	
			Name of Person	
			SIMPLEK GROUP	
			Firm/Company	
			5800 NW 34TH AVE	
			Address	
			MIAMI, FL 33166	
		•	City/State and Zip Code	
		amar C	rtinez@simplexgroup.net to be used for future annual report notification)	
r c.			i	
ror iu	rtner informatior	concerning this matter, please ca	311:	
Α	LAN MARTINEZ	/ SIMPLEX GROUP	at ( 305 ) 599-8287	
-	Name	of Person	Area Code Daytime Telephone Number	
Enclos	sed is a check for	the following amount:		
DM \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy  (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is encl	
	Regi Divi: P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 thassee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

DINAMICS CARRIERS LLC

DINAMICS CARP			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appeared Liability Company)	s on our records.)	<del></del>
(**************************************	1.		
The Articles of Organization for this Limited Liability Compa	ny were filed on	1/25/18	and assigned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the de	esignation "LLC" or the	
Enter new principal offices address, if applicable:			<b>18</b> AC
• • • • • • • • • • • • • • • • • • • •			<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			AHASS
			(1)
			<b>P</b> (1)
Enter new mailing address, if applicable:	<b></b>		<b>~</b> [-0
(Mailing address MAY BE A POST OFFICE BOX)			ORID SE
			>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h  Name of New Registered Agent:		our records, ente	r the name of the new
New Registered Office Address:			
New Negations Office Hadress.	Enter Flor	ida street address	-
		. Florida	
	City	, 1 101 144 _	Zip Code
New Registered Agent's Signature, if changing Registered Ager	<u>ıt:</u>		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	te performance of s provided for in C	my duties, and I am Thapter 605, F.S. O	i familiar with and r, if this document is
If C	hanging Registered Ag	ent, Signature of New I	Registered Agent
	ı		

r removed 1GR = M	-		
MBR = A	uthorized Member		
<u>`itle</u>	<u>Name</u>	Address	Type of Action
MGR	SUAREZ-HERRANZ, JESUS	9008 SW 215TH TER	<mark></mark> ጃ Add
		CUTLER BAY, FL 33189	☐ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			D Add
			□ Remove
			☐ Change
			D Add
			□ Remove
			☐ Change
<del></del>			□ Add
			□ Remove
		_	Change

D. If ame	nding any other information, enter change(s) her	e: (Attach additional sheets, if necessary.)
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		→: 75tro
		75 ACC
_		FEB CAHA
_		ASSEE. F
		PH 7: SB
		7: <b>S</b>
		<b>9</b> 0 <sub>E</sub>
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_		
E. Effective	ve date, il other than the date of filling.	(optional)
Note:	If the date inserted in this block does not meet the applicant's effective date on the Department of State's records	to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(1) able statutory filing requirements, this date will not be listed as the
	ord specifies a delayed effective date, but no 90th day after the record is filed.	ot an effective time, at 12:01 a.m. on the earlier of:
Dated _	FEBRUARY 1ST 2018	
Daled_	,,	Jour,
	Signature of a member or auth	prized representative of a member
	AYLIN FR	AGA
		ed name of signee
	Pag	e 3 of 3
	Filing F	ee: \$25.00