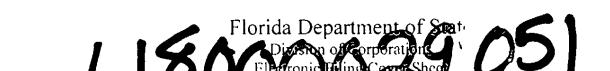
Division of Corporations



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To: Division of Corporations Fax Number : (850)617-6383 Prom: Account Name : LEGALZCOM.COM INC. Account Number : 120010000062

: (323)962-8600 Fax Number : (323)962-3889 \*\*Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please. \*\* Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NORTH FLORIDA LOGISTICS, LLC

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C. BRUMBLES

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Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

-4

## COVER LETTER

-				
	LORIDA LOGISTICS, LLC			
SUBJECT:	Division of Corporations  NORTH FLORIDA LOGISTICS, LLC  Name of Limited Liability Company  e enclosed Articles of Amendment and fee(s) are submitted for filing.  case return all correspondence concerning this matter to the following:  Cheyenne Moseley    Name of Person			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
	Cheyenne Moseley			
		Name of Person	<del></del>	
	Legalzoom.com, Inc.			
	101 N Brand Blvd 11th Ft			
	Z11 - 1 5 - Z14 01707	Address	•	
	Glendale, CA 91203			
		City/State and Zip Code	,	
	E-mail address: (	to be used for future annual repor	notification)	
For further information of	oncerning this matter, please ca	att:		
Cheyenne Moseley		at (		
Name o	f Person	Area Code Di		j.t
Enclosed is a check for t	he following amount:			
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Copy (additional copy is parlosed)	Certificat Certified	e of Status &
	JNG ADDRESS: ration Section	STREET/CO Registration S	URIER ADDRESS:	

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, Fl. 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NORTH FLORIDA LOGISTICS, LLC	senu as it now amount on our To	cards )
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)	(Corole)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L18000029051</u>	y were filed on 02/01/2018	and assigned
This amendment is submitted to amend the following:  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 "LLC."  Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:		
A. If amending name, enter the new name of the limited lia	shillty company here:	
The new name must be distinguishable and contain the words "Limited Lial	hility Company," the designation	*LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		027
(Principal office address MUST BE A STREET ADDRESS)		P
		FILED PH
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		5
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our rec ere:	cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
······································		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent and approvisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a	ite performance of my dutic	rs, and I am Jamiliar with and

If Changing Registered Agent, Signature of New Registered Agent

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.

LegalZoom.com, Inc.

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
AMBR	Ronald Vogel	2063 NE 173RD ST.	■ Add
		STARKE, FL 32091	☐ Remove
		**************************************	☐ Change
AMBR	MARTIN, LARRY W.	2063 NE 173RD ST.	Add
		STARKE, FL 32091	■ Remove
			☐ Change
			D Add
			☐ Remove
			□ Change
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	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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<u>te:</u> []	e date, if other than the date of filing:  tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not but's effective date on the Department of State's records.	to 605.020 e listed a:
reco he <sup>g</sup>	ard specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the $\epsilon$ 00th day after the record is filed.	earlier o
ci _	4/14/2022	
	Signature of a member or authorized representative of a member	_

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Filing Fee: \$25.00