Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160 Phone : (800)494-3124 Fax Number : (305)675-2811

FEB 2 3 2018

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

HN LOGISTIC LLC

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Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

S. WARREN FEB 2 3 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF A

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HN LOGI	STIC LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	y us it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company versions of Company ve	PCDD114 TV 01-06	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:	
n /	, ,	
The new name must be distinguishable and contain the words "Limited Liabilians"	ty Comprny," the designation "LLC" or t	he abbreviation "L.C."
Enter new principal offices address, if applicable:	6923 NARCOOSSEE ROAD	
(Principal office address MUST BE A STREET ADDRESS)	UNIT 613	
Trincipal office and edg visor and and	ORLANDO, FL 32822	
er a dans if ambiables	6923 NARCOOSSEE ROAD	
Enter new mailing address, if applicable:	UNIT 613	
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32822	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	lice address on our records, <u>er</u>	Note: The manner of the last o
N. Di-td Office Address.		
New Registered Office Address:	Enter Florida street address	\$ 8
	, Florid	
	City	Zip Code
New Registered Agent's Signature, If changing Registered Agent:		
I hereby accept the uppointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I provided for in Chapter 605, F.S.	am famillar with and Or, if this document is
	.55 41	
If Chan	ging Registered Agent, Signature of Ne	w Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H18000060842 3

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address -	Type of Action
AMBR	JULIO NEIRA	6923 NARCODSSEE RD	
		UNIT 613	■ Remove
		ORLANDO, FL 32822	☐ Change
AMBR	JOSE NEIRA	6923 NARCOOSSEE RD	Add
		UNIT 613	🗖 Remove
		ORLANDO, FL 32822	Change
MGR JUI	JULIO II. HANZE	5819 COVINGTON COVE WAY	
		ORLANDO, FL 32829	Remove
			□ Change
AMBR	JULIO II. HANZE	5819 COVINGTON COVE WAY	Add
		ORLANDO, FL 32829	Remove
			☐ Change
			🗖 Add
			Remove Change
			3 Avenue
		0	H18000060842 3

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the state of the s	ontinua)
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days.	s after filing.) Pursuant to 605.
 If the date inserted in this block does not meet the applicable statutory fitting requirements 	s, this date will not be listed
ument's effective date on the Department of State's records.	> 9: →
record specifies a delayed effective date, but not an effective time, at 12:	01 a.m.zon the sarlie
he 90th day after the record is filed.	1.15
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() 112/	 (/)
	9 32 OR DA
Signature of a member or authorized representative of a member	¥m ~

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