## L18000 165204

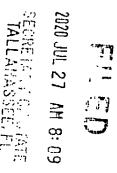
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	<del></del>
(City)	State/Zip/Phone	#)
, ,	•	•
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nam	e)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
	_	
Special Instructions to Fi	iling Officer:	{
ı		

Office Use Only



600348996526

07/27/20--01092--017 \*\*25.00



D. BRUCE SEP 16 7070

## **COVER LETTER**

	Registration Sect Division of Corpo			r r		
SUBJEC	LOGISTRUC	CK, LLC				
SUBJEC	/I: <u> </u>	Name of Lim	ited Liability Company			
The encl	osed Articles of Ai	mendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspond	lence concerning this matter	to the following:			
		ESTANISLAO R MILLE	R			
			Name of Person			
		LOGISTRUCK, LLC				
			Firm/Company			
		15901 COLLINS AVE US	NIT 4005			
			Address			
		MIAMI, FL 33160				
			City/State and Zip Code			
		estanislaomiller@hotmail.c				
		E-mail address: (	to be used for future annual report notific	cation)		
For furth	er information con	cerning this matter, please co	all:			
ESTAN	ISLAO R MILLEF	3	786 599-5695		2020 SEQ:	
linglocad	Name of P	following amount:		Felephone Number	20 JUL 27	77
		•	Eleccopy City of a	<b>5</b> 640.00 000		5 1
\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status 🤗 –	J

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOGISTRUCK, LLC				
(Name of the Lim	ited Liability Company as it no (A Florida Limited Liability C	ow appears on our records.) ompany)		
he Articles of Organization for this Limited I	Liability Company were file	ed on _07/09/2018	a	nd assigned
forida document number L18000165204				
his amendment is submitted to amend the fol	lowing:			
. If amending name, enter the new name of	of the limited liability com	npany here:		
ne new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "LLC" or the	he abbreviat	ion "L.L.C."
nter new principal offices address, if appli	cable:			
Principal office address MUST BE A STRE	ET ADDRESS)			
		· <del></del> -		
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	<u> BOX)</u>			
				•
. If amending the registered agent and egistered agent and/or the new registered of		dress on our records, <u>en</u>	ter the n	and of the
egistered agent and/or the new registered to	onice address here:			
Name of New Registered Agent:	RICARDO E MILLER			27
	10001 001 1 110 110 110		<del></del>	* 171779
New Registered Office Address:		UNIT 4005 MIAMI, FL 3316  Enter Florida street address	o (65)	<u>₹</u>
		timer i unua sireet aaaress	77	77
	MIAMI,	Florida	نسر نے 22140	09

## 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.

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ESTANISLAO R MILLER	15901 COLLINS AVE UNIT 4005	
		MIAMI. FL 33160	■ Remove
			Change
			☐ Remove
			Change
			□ Remove
			☐ Change
			Add 2020 Regnove
			AHA CASS
			Remove
			Add
			□ Remove
			☐ Change

		<del></del>
		<del></del>
		<del></del>
<del></del>		
		<del>-</del>
		() 5
		ZDZO Z SECR
<del></del>		Pi F
		H 27
	07/23/2020	नाहा स
Effective date, if other than the office of the date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	Jate of filing:  be specific and cannot be prior to date of filing or more than 90 day  ck does not meet the applicable statutory filing requirement	(optional) rr 6 ys after filing.) Pursuant to 605.0207 (3 ts, this date will not be listed as the
the record specifies a delayed ) The 90th day after the reco	effective date, but not an effective time, at 12 and is filed.	:01 a.m. on the earlier of:
Dated July 23rd	2020	
/	20	
	rignature of a member or authorized representative of a member	
ESTANISLAO R MILLI	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00