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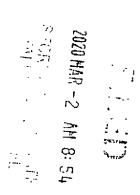
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COVER LETTER

Division of Cor	porations		
SUBJECT:		jo U.C.	
	Name of Ling	i∕ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
		-	
Please return all correspo	ondence concerning this matter	to the following:	
	Marle	ne Franco	Vera
		Name of Person	
		Firm/Company	
	9329 L	1W 68th St Address	
		Address	
	MIAMI, FL	- 33166.	
		City/State and Zip Code	
			.
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Marlene	Franco Vera	at () Area Code Daytime	
Name c	of Person	Area Code Daytimo	Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2001 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Osha cargo	LCC.				
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)				
The Articles of Organization for this Limited Liability Company w Florida document number $\frac{L18000212083}{}$	ere filed on	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ty company here:				
	Tunkes	. 22			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbig.				
Enter new principal offices address, if applicable:	•	HAR			
(Principal office address MUST BE A STREET ADDRESS)		. 2			
		11.			
		ά <u>, π</u>			
Enter new mailing address, if applicable:	 	THE P			
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, <u>enter th</u>	e name of the nev			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, Florida				
	C.Hy.	Zip Code			

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>	Address	Type of Action
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	Marlene Franco Vera	MIAMI P2 33166	Skemove
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