



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : INTERSTATE CARRIER SERVICE CORP
Account Number : I20160000043
Phone : (786) 346-6290
Fax Number : (305) 503-6979

2019 OCT -3 PM 4:17

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Interstatecarrier-service@yahoo.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
L&E LOGISTIC LLC**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

2019 OCT -3 AM 10:37

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Electronic Filing Menu

Corporate Filing Menu

OCT 04 2019

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L&E LOGISTICS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/02/2019 and assigned
Florida document number L18000233815.

This amendment is submitted to amend the following:

A. 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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ELVIS RAMIREZ

New Registered Office Address:

26600 SW 146 CT APT 502

Enter Florida street address

HOMESTEAD

Florida 33032

City

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

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: L&E LOGISTIC LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELVIS RAMIREZ

Name of Person

L&E LOGISTIC LLC

Firm/Company

26600 SW 146 CT APT 502

Address

HOMESTEAD FL 33032

City/State and Zip Code

INTERSTATECARRIERSERVICE@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELVIS RAMIREZ

305 984-5610

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:
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

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MGR = Manager
AMBR = Authorized Member

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201806-3 PH14:17

Effective date, if other than the date of filing: _____ (Optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated OCTOBER 2 2019

M. J. J.

Signature of a member or authorized representative of a member

ELIVS RAMIREZ

Typed or printed name of signer