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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: J41 Exports and Wyistics UC 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:
Michael Korman
191 Exports and Logistics LLC
2828 10th Avenue North, Suite 166
Lake Worth, Fl 334(e) City/State and Zip Code
Michael @ JEJ exports and logistics. Com E-mail address: (to be used for future annual report northcation)
For further information concerning this matter, please call:
Michael Lorman at (570) 369 6301 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee. \$\Bigcup \$Certificate of Status & \$\Bigcup \$(additional copy is enclosed)\$\$ 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited I	45 Md Jability Compan Florida Limited Li	DUISTICS LL v ask now appears on ability Company)	our records.)		
The Articles of Organization for this Limited Liabi Florida document number <u>L</u> \ <u>800024564</u> This amendment is submitted to amend the following the A. If amending name, enter the new name of the	<u>6</u> ng:		<u> 18 2018</u>	ECRETARY OF CALLAHASSEE, FL	gned TICE
The new name must be distinguishable and contain the words	s "Limited Liabilit	y Company," the design			C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A		2828 10th Lake worth	Avenue n, Fl. 33	North , S 3461	<u>suite</u> 100
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>.V)</u>	2828 10th Lake no	Avenue 1 th, Fi	1 1 / 1	te 106
B. If amending the registered agent and/or registered agent and/or the new registered office			r records, <u>ente</u>	er the name o	of the new
Name of New Registered Agent:	Mic	nact Korma	n		
New Registered Office Address:	2828	10th Avenue Enter Florida s	North	Buik 106	
-	Lake u	UCH City	Florida	33461 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:

Manager Authorized Member		
<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00