L18000256263

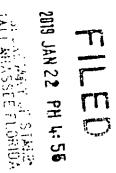
(Requestor's Name)
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(Document Number)
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COVER LETTER

10: Registration So Division of Co			•		
' WOLFY L SUBJECT:	OGISTICS LLC				
30032.01.	Name of Lim	ited 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:			
	Jose A. Bonavia	÷			
		Name of Person			
	WOLFY LOGISTICS LLC	Ĉ			
		Firm/Company			
	7019 SW 162 PATH				
		Address			
	MIAMI, FL 33193				
		City/State and Zip Code			
	AP@wolfylogisticsllc.com			2019 ALL	
	E-mail address: (to be used for future annual report notific	ation)	JAN JAN	7
For further information of	concerning this matter, please co	all:		N 22	
Jose A. Bonavia		1-877 318-0999 EXT			
Name (of Person	Area Code Daytime T	elephone Number	25. 28 28 28 29 29 29 29 29 29 29 29	البيا
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)	Certified C	of Status &	

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

WOLFY LOGISTICS LLC		
(<u>Name of the Limited Liabi</u> (A Floric	ility Company as it now appears on our records.) da Limited Liability Company)	——————————————————————————————————————
The Articles of Organization for this Limited Liability	Company were filed on 10/31/2018	and assigned
Florida document number L18000256263	<u>.</u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	·	
B. If amending the registered agent and/or reg		the name of the
registered agent and/or the new registered office ad	ldress here:	2019 TACI
Name of New Registered Agent:		MAN 2
New Registered Office Address:		<u> </u>
	Enter Florida street address	
<u></u>	, Florida,	
	City	Zip Colle

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
CFO	Jose A. Bonavia	7019 SW 162 PATH MIAMI, FL 33193	= Add
			Remove
			Change
COO	Ray Paredes	7019 SW 162 PATH MIAMI, FL 33193	= Add
			□ Remove
			Change
			□ Add
			Remove
			Change
			A Semove
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fective date, if other than the d	ate of filin	g: <u>10/31/20</u>	18		(optional)		.57.
nective date, if other than the commence of the date in the date inserted in this blocking in the date inserted in the Department's effective date on the Department.	be specific and the does not no partment of S	d cannot be pri neet the appl State's record	or to date of icable statu is.	filing or more tory filing r	than 90 days equirement	s after filing.) s, this date v	Purspint to vill not be	isted
record specifies a delayed The 90th day after the reco			not an eff	ective tim	e, at 12:	01 a.m. c	on the e	arlier
The John day after the reco	is incu.							
January 11th		2019			-			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00