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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839

Fax Number : (305)599-0839

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

Email	Address:		
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MCN TRANSPORT LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MCN TRANSPORT LL	С	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company	were filed onDECEMBER 03, 2018	and assigned
Florida document number L18000278+76		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liable	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		20
		20
		C
Enter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		<u> </u>
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B. If amending the registored agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the nam	e of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enier Florida street address	
	, Florida	
	Clry	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

Title	<u>Name</u>	Address	Type of Action
MGR	YUNIEL ALONSO	20241 SW 125 AVENUE	
		MIAMI, FL 33177	■ Remové
			□ Change
			□Remove 2020 □Change
			OAdd
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			□Add
			DRemove
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	date, if other than the date of filing: (optional) ve 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 (and the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
he record s ord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	12/1/20
	Signature of a member or authorized representative of a member
	LUIS ALBERTO HERNANDEZ

Filing Fee: \$25.00