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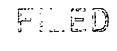
## **COVER LETTER**

	Registration Se Division of Cor			
eun uz		OGISTIC, LLC.		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The encle	ased Articles of	Amendment and fee(s) are sub	mitted for filing	
		indence concerning this matter		
Please re	turn all correspo	indence concerning this matter	to the following.	
		AQUILES RODRIGUEZ		
		<del></del>	Name of Person	
		HEROS LOGISTIC, LLC		
			Firm/Company	<del></del>
		4210 Nw 107th Ave		
			Address	
		Miami FL 33178		
			City/State and Zip Code	<del>_</del>
		aquiles.rodriguez@heroslog		
		E-mail address: (	to be used for future annual report notif	ication)
For furth	er information c	oncerning this matter, please co	ail:	
AQUILI	ES RODRIGUE	7.	786 332-8853	
	Name o	f Person	Area Code Daytimo	Telephone Number
Enclosed	l is a check for t	he following amount:		
	00 Filing Fee	S30.00 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)
	Regisu	ING ADDRESS:	STREET/COURING Registration Section	n
		on of Corporations ox 6327	Division of Corpora Clifton Building	ations

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



2019 MAY 21 PM 6: 04

HEROS LOGISTIC, LLC.			Con correct	
(Name of the Lim	nited Liability Company as (A Florida Limited Liabili	it now appears on o ty Company)	ur records.)	
he Articles of Organization for this Limited	Liability Company were	filed on 04/02/20	)19	and assigned
orida document number L19000090449				
nis amendment is submitted to amend the fo	llowing:			
. If amending name, enter the new name	of the limited liability of	company here:		
he new name must be distinguishable and contain the	words "Limited Liability Co	mpany," the designa	tion "LLC" or the abbi	reviation "L.L.C."
nter new principal offices address, if appli	icable:			
Principal office address MUST BE A STRE	ET ADDRESS)			
		<del></del>		
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	<u> E BOX)</u>			
				<del></del>
a see as as a see a		4.	•	
<ol> <li>If amending the registered agent and egistered agent and/or the new registered of</li> </ol>		address on our	records, enter t	ne name of the
Name of New Registered Agent:	AQUILES RODRIG	UEZ		
New Registered Office Address:	4210 Nw 107th Ave			
general of Figure 1861.		Enter Florido str	eet address	
	MIAMI		, Florida <u>331</u> 1	78
		City		Zip Code
ew Registered Agent's Signature, if changing	Registered Agent:			
hereby accept the appointment as register rovisions of all statutes relative to the pro ccept the obligations of my position as reg	per and complete perfe gistered agent as provi	ormance of my d ded for in Chapt	luties, and I am fa er 605, F.S. Or, ij	miliar with and Ethis document i
eing filed to merely reflect a change in the ompany has been notified in writing of thi.				ted liability

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
MGR	DIEGO LOPEZ	5623 NW 112th PL. DORAL FL 33178	Add
			■ Remove
		4210 Nw 107th Ave Miami Fl 33178	Change
AMBR	CARLOS A. RODRIGUEZ		■ Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
		<del> </del>	
			Remove
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			Change
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Note: If the	ate, if other that date is listed, the d date inserted in effective date on	this block does	filing: ific and cam s not meet	the applica	to date of filing	or more than filing requir	(optio 90 days after ements, this	filing.) Pursuan	t to 605.020° be listed as
	specifies a de n day after th			e, but no	t an effecti	ve time, a	t 12:01 a	.m. on the	earlier o
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Page 3 of 3

Filing Fee: \$25.00