1190000 95173

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300334942923

10/04/19--01007--020 **25.00

2613 0 T - 4 PH 12: 18

R V

COVER LETTER

TO: Registration Secti Division of Corpo			
SUBJECT:	tandard Logi Name of Logi	istic Services L ted Liability Company	10
The enclosed Articles of Art	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter t	to the following:	
	Kenne	the H Son, the	Tr.
	Stan	dard Logistic	Services LLC
	10086 Sta	nehenge Circle 1	1pt 309
		Beach Florida City/State and Zip Code X Ken 23 @ Valoc obe used for future annual report notifi	
For further information con	cerning this matter, please ca	all:	
Kenneth Name of P	th Sinith	at (561) 400 - Area Code Daytime	49/5 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Standard Log	obility Company as it now appears on our records.) onda Limited Liability Company)
(<u>Name of the Limited Lfal</u> (A Flo	bility Company as it now appears on our records.) onda Limited Liability Company)
	y Company were filed on $\frac{4/05/2017}{}$ and assigned
This amendment is submitted to amend the following	;
A. If amending name, enter the new name of the l	limited liability company here:
The new name must be distinguishable and contain the words "I	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 AD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new
New Registered Office Address:	Enter Florida street address
	, Florida
	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

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.	Kenneth H Smith Ir	10086 Stonehenge Cir. Apt. 309 - Boynton Buh FL	& Add 334-7.3
			□ Remove
			Change
<u>AMBR</u>	Kenneth Smith SR.	8453 Breezy Hill DR. Boynton Beach FL 3307	DAdd 3
			Remove
			☐ Change
AMBR	Sheron Smith	3453 Breezy Hill Dr. Boynton Beach FL 330	T3-Add
			□ Remove
			Change
			D Add
			□ Remove
			Change
	<u> </u>		□ Add
			Remove
			Change
			□ Add
			Remove
		, <u>.</u>	Change

). If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
- Effective	e date, if other than the date of filing:(optional)
(If an effect <u>Note:</u> If	tive 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)(to the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the it's effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed.
Dated	
	Signature of a member of authorized representative of a member
	Kenneth H. Smith Tr Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00