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| (Re | questor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Registration Section Division of Corporations SUBJECT: Pecise Description 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: |
| Maneta Holton Name of Person Ptecise Logistics Transport (CC Firm/Company Bladenton Fl 34708 City/State and Zip Code MFC a Declise Logistics Lansport. Can |
| E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: |
| Name of Person at (a41) 920 2631 Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 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

| Precise Logistics | Transport LLC |
|---|---|
| (Name of the-Limited Liability | (Company as it new appears on our records.) Limited Liability Company) |
| The Articles of Organization for this Limited Liability Co | Sompany were filed on $4/26/2019$ and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limit | ed liability company here: |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRE | ESS) |
| Enter new mailing address, if applicable: | TA 20 |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| B. If amending the registered agent and/or registeregistered agent and/or the new registered office addre | ered office address on our records, enter the name of the new ess here: |
| Name of New Registered Agent: | ··· |
| 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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|----------------|-----------------|----------------|
| MGR | Wanetta Hartan | 1617 14th Ave E | Add |
| | | Bradevion Fl | Remove |
| | | 34208 | Change |
| | | | Add |
| | | | Remove |
| | | | Change |
| | | | D Add |
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| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) | |
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| E. Effective date, if other than the date of filing: (If an effective 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 605,02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. | 207 (3)(1 as the |
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier (b) The 90th day after the record is filed. | of: |
| Dated DC+ 18. 2019. Raph Photo Signature of a member or sythorized representative of a member | |
| Raph Horton Strange of signee | |

Page 3 of 3

Filing Fee: \$25.00