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COVER LETTER

Division of Cor								
FAST AND	EAST LOGISTICS, LLC							
Name of Limited Liability Company								
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.						
Please return all correspon	ndence concerning this matter	to the following:						
	JOHN GOMEZ							
		Name of Person						
		Firm/Company						
	7788 SW 90th STREET							
		Address						
	MIAMI, FL 33156							
	• • • • • • • • • • • • • • • • • • • •	City/State and Zip Code						
	FASTANDEASYLOGISTI	ICS@YAHOO.COM						
	E-mail address: (to be used for future annual report notifi	ication)					
For further information ed	meerning this matter, please c	all:						
JOHN GOMEZ		786 803-6357						
Name of	Person	Area Code Daytime	Telephone Number					
Enclosed is a check for th	e 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

FAST AND EAST LOGISTICS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{06/27/2019}{1}$ and assigned Florida document number 1.19000169304 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FAST AND EASY LOGISTICS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L1.C" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) പ B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

Circ

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being adde</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			Remove
		 	Change
			Add
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		07/01/2019			
Effective date, if other (If an effective date is listed, the Note: If the date inserted document's effective date	in this block does	not meet the applical	date of filing or more th ble statutory filing req	(optional) an 90 days after filing.) Pursua airements, this date will no	nt to 605.0207 (3 t be fisted as the
the record specifies a) The 90th day after			an effective time	at 12:01 a.m. on the	earlier of:
Dated JULY 17		2019			
Date u	./	,	_ ·		
		20	ized representative of a r		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00