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COVER LETTER

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	regrity	/ LOGISTICS AND SHIPPIN	IG USA LLC	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed Ar	ticles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all	correspoi	ndence concerning this matter	to the following:	
		EVANS L. BAUGH		
			Name of Person	
		INTEGRITY LOGISICS A	AND SHIPPING USA LLC	
			Firm/Company	
		19383 SW 60TH COURT.		
			Address	
		SOUTHWEST RANCHES	5, FL.33332	
			City/State and Zip Code	
		leslie.baugh@integrity-logi:		
r calc			to be used for future annual report notif	ication)
		oncerning this matter, please of		
EVANS L. BAU	JGH		954 7601840 at ()	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is a che	eck for th	e following amount:		
□ \$25.00 Filin	g 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)
	Address ration S		Street Address: Registration Sec	ction
_		orporations	Division of Cor	porations
	30x 632		The Centre of T	
Tallah	assee, F	L 32314	2415 N. Monros	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTEGRITY LOGISTICS AND SHIPPING USA 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 AUG. 20, 2019 and assigned Florida document number L19000212703 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: L. BAUGH LOGISTICS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A 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) 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 _. Florida ___ City

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 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>	Name	Address	Type of Action
N/A	N/A	N/A	□Add
			□Remove
		-	Change
			□Add
			Remove
			Change
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r effective date is listed.	the date must be specific an	nd cannot be prior to date of	filing or more than 90 day	s after filing.) Pursuant to 605. is, this date will not be liste
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	yed effective date, but no	ot an effective time, at 11		or. (b) The 70th day after
ecord specifies a dela	yed effective date, but no	ot an effective time, at 11		or. (b) The 90th day after
ecord specifies a dela is filed.	yed effective date, but no			or. (b) The 70th day and
	yed effective date, but no	2021		or. (b) The 70th day and
ecord specifies a dela is filed.	yed effective date, but no			or. (b) The 70th day after
ecord specifies a dela is filed.		7· 2021		or. (b) The 70th day and
ecord specifies a dela is filed.				or. (b) The 70th day after

Filing Fee: \$25.00