## L19000226158

(Red	questor's Name)	
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(Cit	y/State/Zip/Phone	: #)
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
	TY LOGISTICS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	RICHARD ALVARADO		
		Name of Person	
		Firm/Company	
	254 41ST AVE NW		
		Address	
	NAPLES , FL 34120		
		City/State and Zip Code	<del>.</del>
	info@royalcitylogistics.com		
For further information of	e-mail address: (	to be used for future annual report no all:	uncation
RICHARD ALVARADO	O	239 3843766 at ( )	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	he 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 Addres		Street Address: Registration S	ection
Division of C		Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee, FL 32314		2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ROYAL CITY LOGISTICS LLC

2021 OCT 21 PH 12: 39

(Name of the Limited Liability Com (A Florida Limite	d Liability Company)	TALLAL OF STATE
The Articles of Organization for this Limited Liability Compar Florida document number L19000226158	ny were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designa	ttion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	254 41ST AVE NW	
(Principal office address MUST BE A STREET ADDRESS)	NAPLES, FL	
	34120	
Enter new mailing address, if applicable:	254 41ST AVE NW	
(Mailing address MAY BE A POST OFFICE BOX)	NAPLES, FL	
	34120	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	e address on our record	is, enter the name of the new regis
254.41CT A3	VF NW	
New Registered Office Address: 234 4131 A	Enter Florida sti	reet address
NAPLES		, Florida <sup>34120</sup>
	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 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
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Note:	five date, if other than the date of filing:
he reco ord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	10/07/2021
	Signature of a member or authorized representative of a member
	RICHARD ALVARADO
	Typed or printed name of signee

. .

Filing Fee: \$25.00