7/27/22, 3:07 PM

Division of Corporations

(((H22000254465 3)))



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000254465 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BOYER LAW FIRM, P.L.

Account Number : I20100000071 Phone : (904)236-5317 Fax Number : (904)371-3935

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: office@boyerlawfirm.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INTERNATIONAL TIME CRITICAL TRANSPORTERS, LI

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## **COVER LETTER**

(((H22000254465 3)))

NATIONAL TIME CRITICAL T	·	
Name of Lin		
	nited Liability Company	
s of Amendment and fee(s) are sub	omitted for filing.	
espondence concerning this matter	to the following:	
Francis M Boyer		
	Name of Person	<del></del>
Boyer Law Firm, P.L.		
	Firm/Company	
9471 Baymeadows Rd, Su	ite 406	
	Address	
Jacksonville, FL 32256		
office@boyerlawfirm.com	City/State and Zip Code	
E-mail address: (	to be used for future annual report notifi	ication)
on concerning this matter, please c	all:	
	904 236-5317 at ( )	
ne of Person	Area Code Daytime	Telephone Number
or the following amount:		
© \$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)
	Street Address:	tion
	Francis M Boyer  Boyer Law Firm, P.L.  9471 Baymeadows Rd, Su  Jacksonville, FL 32256  office@boyerlawfirm.com  E-mail address: ( on concerning this matter, please concerning this matter, please concerning this matter.)	Boyer Law Firm, P.L.

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

To: 18506176383 From: 19047198360 Date: 07/27/22 Time: 12:14 PM Page: 04/06

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(((H22000254465 3)))

INTERNATIONAL TIME CRITIC	CAL TRANSPORT	ERS, LLC		
(Name of the Limi	ted Liability Compa (A Florida Limited L	ny as it now appears on our reco liability Company)	rds.)	_
The Articles of Organization for this Limited L Florida document number <u>L19000273417</u>	Liability Company	were filed on 11-14-2019	and	assigned
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name o	of the limited liab	lity company here:		
Seoul Expedite Logistics LLC				
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "Ll	LC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applic	cable:			
(Principal office address MUST BE A STREI	ET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and/or agent and/or the new registered office address.	registered office a	iddress on our records, <u>ent</u>	er the name of the	new registered
Name of New Registered Agent:	Francis M. Boy	er, Esq	ECR ECR	
New Registered Office Address:	9471 Baymeado	ows Rd, Suite 406	E ASS	FA AGA
		Enter Florida street add	res mi	E SO
	Jacksonville	, ]	Florida 3236	ÝÉ
		City		de
New Registered Agent's Signature, if changing	Registered Agent:		<™ <b>₹</b>	
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete sistered agent as p registered office	performance of my duties, provided for in Chapter 60:	and I am familiar 5, F.S. Or, if this de	with and ocument is

To: 18506176383 From: 19047198360 Date: 07/27/22 Time: 12:14 PM Page: 05/06

## If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: ((H22000254465 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	SPIVACK, ALAN	15168 W. TRANQUILITY LAKE DR.	□ <b>Add</b>
		DELRAY BEACH, FL 33446	Remove
			□ Change
MGR	NICHOLS, JOSHUA	447 W Silvertip Rd	
		Oro Valley, AZ 85737	□Remove
			□Change
MGR	REISS, BRENDAN	1700 Lucille Ln	<b>=</b> Add
		Pleasant Hill, CA 94523	□Remove
			☐ Change
			□ Add
			□Remove
			Change
			🗆 Add
			□Remove
			☐ Change
			□ Add
			□Remove
			□ Change

To: 18506176383 From: 19047198360 Date: 07/27/22 Time: 12:14 PM Page: 06/06

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