L20000029321

(Requestor's Name)	- .
(Address)	
(Address)	
(City/State/Zip/Phone #)	
☐ PICK-UP ☐ WAIT ☐ MAIL	
(Business Entity Name)	
(Submoss Entry Hame)	
(Document Number)	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 17, 2020

LUIS G RODRIGUEZ COLON 10779 SW 225 ST MIAMI, FL 33186

SUBJECT: GARR VENTURES LLC

Ref. Number: L20000029321

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L17000136923-FYC LOGISTIC, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 220A00025656

COVER LETTER

TO:	Registration Sec Division of Corp				
.21.12.112.		TURĖS LLC	· · · · · · · · · · · · · · · · · · ·		
SUBJE(CI:	Name of Limit	ed Liability Company		
The enc	losed Articles of a	Amendment and fee(s) are subn	nitted for filing.		
Please r	eturn all correspor	ndence concerning this matter to	o the following:		
		LUIS G RODRIGUEZ COI	LON		
			Name of Person		
			Firm/Company		
		10779 SW 225 ST			
		Address			
		MIAMI, FL 33186			
		INFO@FYCGROUPLLC.C	City/State and Zip Code		
		_	o be used for future annual report notif	ication)	
For fur	ther information c	oncerning this matter, please ca	all:		
LUIS	G RODRIGUEZ (COLON	305 481-3753		
	Name o	f Person	Area Code Daytimo	: Telephone Number	
Enclos	ed is a check for th	he following amount:			
≡ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres	88: C	Street Address:	ction	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GARR VENTURES LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.20000029324}{1.00000029324}$	were filed on JANUARY 23, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
FYC LOGISTICS GROUP LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LEC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	14104 SW 139TH CT	<i>(~)</i>
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33186	(50
		7:
		27
Enter new mailing address, if applicable:	14104 SW 139TH CT	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33186	
		 ယ ယ
B. If amending the registered agent and/or registered office : agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address	name of the new register
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and Leorovided for in Chapter 605, F.S.	un familiar with and Or, if this document is

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>	<u>Address</u>	Type of Action
MGR	ALEX MEDINA	14104 SW 139TH CT	≣ Add
		MIAMI, FL 33186	□Remove
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			Cladd
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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fan eilecti <u>Note:</u> If i	date, if other than the date of filing:
record s d is filed.	becifies a delayed effective date, but not an effective time, at 12:04 a.m. on the earlier of: (b) The 90th day after the
Dated	NUARY 19. 2021
	Signature of a member of authorized representative of a member
	LUIS G RODRIGUEZ COLON
	Typed or printed name of signee

Filing Fee: \$25.00