## L20000035456

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(Chystate/Epirhone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certified Copies
Special Instructions to Filing Officer.

Office Use Only



700340839347

2020 FEB 19 AH 10: 20

Y SULKER FEB 2 0 2020

## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

**DATE:** 2/19/20

NAME: FIRST COAST INTERMODALLOGISTICS BALTIMORE LLC

Alodge

TYPE OF FILING: STATEMENT OF CORRECTION

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST COAST INTERMODALOGISTICS BALTIMORE LLC FIRST: The name of the limited liability company is: The Florida Document number of the limited liability company is: L20000035456 SECOND: Document to be corrected is: \_\_\_\_ARTICLES OF ORGANIZATION THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT ◪ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: THE REGISTERED AGENT IS INCORRECT. THE CORRECT REGISTERED AGENT IS: BLUMBERGEXCELSIOR CORPORATE SERVICES, INC. 155 OFFICE PLAZA DRIVE, 1ST FL., TALLAHASSEE, FL 32301 <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic transmission of the record was defective. /s/ Ken Kellaway 02/18/2020 Signature of Authorized Representative Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature \$25.00 Filing Fee:

Certified Copy:

\$30.00 (optional)