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## **COVER LETTER**

TO:

TO:	Registration S Division of Co					
01:15.11**		GISTICS TRANSPORT LLC				
SUBJEC	(): 	Name of Limited Liability Company				
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please ro	eturn all corresp	ondence concerning this matter	to the following:			
			VANESSA TORRES			
			Name of Person	<del></del>		
		AL1.	AMERICAN PERMITS LLC			
			Firm/Company			
		6801	NW 77TH AVE SUITE 103			
		<del></del>	Address			
			MIAMI F1. 33166			
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code			
			permits2009@live.com			
		E-mail address: (	to be used for future annual report not	tification)		
For furth	ner information	concerning this matter, please of	all:			
	VANESSA	TORRES	305 501-4791			
	Name	of Person	at () Area Code Daytir	ne Telephone Number		
Enclosed	d is a check for	the following amount:				
<b>■ \$</b> 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 Addre		Street Address:	vetion		
	Registration Division of 0	Section Corporations	Registration Section Division of Corporations			
	P.O. Box 63	27	The Centre of	Tallahassee		
	Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAP LOGISTICS	TRANSPORT	LLC
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(ame or the lan	(A Florida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Florida document number 1.20000044863	Liability Company were filed on 02/07	/2020	_ and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company here:		
The new name must be distinguishable and contain the	words "Limited Liability Company," the design	nation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if appli	icable:	• :	
(Principal office address MUST BE A STRE			<del>-20</del>
	LI ADDRESS)		表一丁
	<del></del>	<u> </u>	- 20 11
			OI -
Enter new mailing address, if applicable:		,	- Ti
(Mailing address MAY BE A POST OFFICE			<del></del>
		<u></u>	<del></del>
	<del></del>		
B. If amending the registered agent and/or agent and/or the new registered office addressed agent.  Name of New Registered Agent:	registered office address on our records here:  JUAN HERNANDEZ ZAMORA	ds, <u>enter the name of</u>	the new registered
New Registered Office Address:	20170 W DIXIE HWY 26304		<del></del>
	Enter Florida su	eet address	<del>"</del>
	AVENTURA,	33180	
	Ciņ	Florida 33180	up Code
New Registered Agent's Signature, if changing I	Registered Agent:	ű	42 Y 041
hereby accept the appointment as registere provisions of all statutes relative to the proposecept the obligations of my position as reginering filed to merely reflect a change in the rompany has been notified in writing of this company has been notified in writing of	stered agent as provided for in Chapt registered office address, I hereby con change.	uties, and I am familer 605, F.S. Or, if the afternation that the limited	iar with and is document is ! liability
	If Changing Registered Agent, Si	nature of New Registere	ed 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
P	JUAN HERNANDEZ ZAMORA	20170 W DIXIE HWY 26304 AVENTUR	A. FL 33180 ■Add
		AVENTURA, FL 33180	□Remove
			DChange
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		AVENTURA, FL 33180	<b>≣</b> Remove
			[] Change
VP	HOYOS, GABRIEL	20170 W DIXIE HWY 26304	⊋Ædd
		AVENTURA, FL 33180	20 StRemove
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ffective date, if other tan effective date is listed, the ote: If the date inserted in inserted in its procure of the fective date of the fective date of the fective date of the fective date.	date must be specific on this block does not the Department of	and cannot be prior to t meet the applical if State's records.	o date of filing or more ble statutory filing re	than 90 days after fil equirements, this d	ing.) Pursua ate will no	int to 60: It be list	5.0207 ted as
ecord specifies a delayed is filed.	effective date, but n	ot an effective tim	ie, at 12:01 a.m. on i	he earlier of: (b)	The 90th	day afte	r the
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Filing Fee: \$25.00