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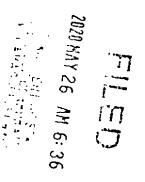
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JUN 13 2020

S. YOUNG

COVER LETTER

Division of Corp	orations				
BMA TRAI	DING & LOGISTICS LLC	•	•		
SUBJECT:					
	Name of Limi	ited Liability Company			
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	Javier Ignacio Bravo Mas				
		Name of Person			
		Firm/Company			
185 SE 14th Terrace - Apt 2113					
	Miami, FL 33131	Address			
	DLONDONO@VISAMIA	City/State and Zip Code MI.COM			
	E-mail address: (1	to be used for future annual report notif	ication)		
For further information co	oncerning this matter, please ca	all:			
DANIELA LONDONO		954 3766161			
		at () Area Code Daytime	Telephone Number		
Name of	Person	Area Code Daytime	: Telephone Number		
Enclosed is a check for the	e 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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

		_
(Name of the Limit	(ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
		- *
The Articles of Organization for this Limited Li	latility Company Nerv Inve on	assigned -
Florida document numberL2000010596	 .	"-5
This amendment is submitted to amend the following		100 <u>-</u> 100 - 100
A. If amending name, enter the new name of	f the limited liability company here:	120 Sec. 1
The new name must be distinguishable and contain the w	words "Limited Liability Company," the designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	
(Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and	/or registered office address on our records, enter the naπ	ie of the nev
(Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and	/or registered office address on our records, enter the naπ	ie of the nev
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/ registered agent and/or the new registered of	/or registered office address on our records, enter the naπ	ie of the nev
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent:	/or registered office address on our records, <u>enter the пап</u> ffice address here:	ie of the nev

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 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> **Address** Type of Action JAVIER IGNACIO BRAVO MGR 185 SE 14th Terrace - Apt 2113, MAS Miami, FL 33131 **■** Add □ Remove ☐ Change □ Add ☐ Remove _□ Change _□ Add _□ Remove _ Change _□ Add _□ Remove ☐ Change _□ Add _□ Remove _ Change _□ Add _□ Remove

_□ Change

amending any other informat	ion, enter change(s) here: (/	utach additional sheets.	if necessary.)
			
			
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<u> </u>			
Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this blocument's effective date on the E	lock does not meet the applicable	ate of filing or more than 90 d statutory filing requireme	_ (optional) ays after filing.) Pursuant to 605.0207 nts, this date will not be listed as
e record specifies a delaye The 90th day after the rec	d effective date, but not a cord is filed.	n effective time at 1	2:01 a.m. on the earlier o
MAY, 15	2020		
Dated	1 ,	-11	
	Signature of a member or authorize	d representative of a membe	
ADRIAN AGRESTI -	MGR		
	Typed or printed n	ame of signee	

Page 3 of 3

Filing Fee: \$25.00