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COVER LETTER

	EPOT LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JOEL JOSE DUNO NAV	ARRO	
		Name of Person	. <u></u>
	Division of Corporations CAKES DEPOT LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. asser return all correspondence concerning this matter to the following: JOEL JOSE DUNO NAVARRO		
Division of Corporations CAKES DEPOT LLC Name of Limited Liability Company			
	CAKES DEPOT LLC Thame of Limited Liability Company Allosed Articles of Amendment and fee(s) are submitted for filing. Total correspondence concerning this matter to the following: JOEL JOSE DUNO NAVARRO		
		nent and fee(s) are submitted for filing. oncerning this matter to the following: L JOSE DUNO NAVARRO Name of Person OGISTICS MIAMI Firm/Company 7 SW 32ND TERRACE Address MI, FL. 33185 City/State and Zip Code no@gmail.com E-mail address: (to be used for future annual report notification) g this matter, please call: at (
	MIAMI, FL. 33185		
	CAKES DEPOT LLC Nume of Limited Liability Company Closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: JOEL JOSE DUNO NAVARRO		
	•	to he would fire first an annual ground not financial	
For further information		•	
Name	of Person	Area Code Daytime Telephor	ne Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration Division of O P.O. Box 63	Section Corporations 27	Registration Section Division of Corporation The Centre of Tallahass	see

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAKES DEPOT LLC				
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)		_	
The Articles of Organization for this Limited Liability Company	were filed on 05/12/2020	and	assign	ied
Florida document number L20000127773			_	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
Z LOGISTICS MIAMI LLC				
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or th	e abbreviation	"L.L.C	
Enter new principal offices address, if applicable:	15537 SW 32ND TERRACE			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL. 33185			
		<u> </u>		-
Enter new mailing address, if applicable:	15537 SW 32ND TERRACE			
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL. 33185			
				.
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the	new re	egistere
			٠.	
Name of New Registered Agent:			P	: • :
New Registered Office Address:			<u> </u>	م _{خود} .
	Enter Florida street address	7	2	
	, Florida	Zin Co	7	
	City	Zin Co	vie	

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.

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
			□Add
			□Remove
			□ Change
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Effective date, if other than the If an effective date is listed, the date me Note: If the date inserted in this b document's effective date on the I	block does not meet the ap	plicable statutory filing requ	(optional) n 90 days after filing.) Pursuant to 60 irements, this date will not be lis)5.0207 (sted as t
e record specifies a delayed effection of the control of the contr	ve date, but not an effectiv	ve time, at 12:01 a.m. on the	carlier of: (b) The 90th day after	er the
Dated 07/12/2021	12:01 A	M.		
	Di	7		
		_		
	Signature of a member or a	authorized representative of a m	ember	

Filing Fee: \$25.00