L20 000177863

(Re	questor's Name)	
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2021 HAR 19 AM 1: 24
FALLAHASSFE, FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

OELOGISTICS LLC

(Name of the Limited Liability Company as it now appears on our records.)

(Name of the Limited Liability Company as it no	ow appears on our records.)
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ompany)
The Articles of Organization for this Limited Liability Company were file Florida document number <u>L20000177863</u> .	ed on <u>UUII 13th 202</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	ipany here:
	gistics LLC
he new name must be distinguishable and contain the words "Limited Liability Compa	my," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	- 23
Principal office address MUST BE A STREET ADDRESS)	
	AR II
	59: 19
nter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	# 24
S. If amending the registered agent and/or registered office address of gent and/or the new registered office address here: Name of New Registered Agent:	on our records, enter the name of the new regi
New Registered Office Address:	
	Enter Florida street address
	, Florida
City	Zip Code

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>	Name	Address	Type of Action
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			□Remove
			□Change
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ective date, if other than the date of effective date is listed, the date must be spe	of filing:	to data of Climan	(opt	ional)	(05.0)
e: If the date inserted in this block do	es not meet the appli	cable statutory filing	ore man 90 days and 3 requirements, th	is date will i	not be listed
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cord specifies a delayed effective date.	but not an effective t	time, at 12:01 a.m. c	on the earlier of: (1	o) The 90th	h dav after t
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Signati	ire of a member or auth	ofized representative	of a member		
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