

L20000 232 434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

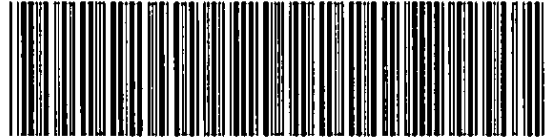
(Business Entity Name)

(Document Number)

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09/09/20--01028--023 **25.00

2003-09-17 17:17

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: P Blooms Logistics, LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAFAEL E. VELASQUEZ
Name of Person
P Blooms Logistics, LLC
Firm/Company
8305 NW 27th Bay 111
Address
Doral, FLORIDA 33127
City/State and Zip Code
REVELASQUEZ1@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAFAEL VELASQUEZ at (954) 934-3066
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

PBblooms Logistics, LLC

2020-08-03 17:10

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

The Articles of Organization for this Limited Liability Company were filed on 8/03/2020 and assigned
Florida document number L20000232434.

This amendment is submitted to amend the following:

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

RAFAEL VELASQUEZ

(Principal office address MUST BE A STREET ADDRESS)

8305 NW 27th Bay 111

Doral, Florida 33122

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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 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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>RAFAEL VELASQUEZ</u>	<u>8305 NW 27st Bay 111 Doral, FL 33122</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>ANDRES CHIRIBOGA</u>		<input type="checkbox"/> Add
		<u>8305 NW 27st Bay 111 Doral, FL 33122</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

9/2/2020 - Sept 164 2, 2020.

RAFAEL VELASQUEZ

Typed or printed name of signee

Filing Fee: \$25.00

P BLOOMS LOGISTICS, LLC
The Trusted Partner In Your Supply Chain

P BLOOMS LOGISTICS, LLC
FILE #L20000232434
8305 NW 27th St.
Bay #111
Doral, FL 33122

September 3, 2020

FLORIDA DEPARTMENT OF STATE
Registration Section
DIVISIONS OF CORPORATIONS
P.O. Box 6327
Tallahassee, FL. 323314

RE: File # L20000232434- Amendment and Remove with New Ownership and Management

Registration Management,

We at P BLOOMS LOGISTICS, LLC are currently in restructuring of ownership and management and are applying with the attached Amendment form to reassign the above mentioned FILE # L20000232434 ownership to the following Official Owner/Manager:

ADD:
Rafael Velásquez- Manager
FL. DL# V422-725-77-144-0
P BLOOMS LOGISTICS, LLC
8305 NW 27th St.
Bay #111
Doral, FL. 33122
954 934 3066
Revelasquez1@hotmail.com

REMOVE:
Andres Chiriboga- Manager
FL. DL.# C612-002-68-019-0
P BLOOMS LOGISTICS, LLC
8305 NW 27th St.
Bay #111
Doral, FL. 33122
305 244 0378
pacificblooms@bellsouth.net

We would like that Mr. ANDRES CHIRIBOGA residing at the above address be removed of any link or attachment of ownership or management of the above mentioned FILE Number Assigned to P BLOOMS LOGISTICS, LLC.

Thank you for your time and consideration. Will be awaiting to your prompt response to this amendment, transfer and / or reassignment of ownership.

Transferee:


Rafael Velásquez

Date:

9/3/2020

Transferor:


Andres Chiriboga

Date:

9/3/2020