L20000233694

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JL "North East Logistics UC Name of Limited Clability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Johnny Valcourt Name of Person
JL North East Logistics UC Firm/Condpany
1311 Biscayne Grove Un. Address
Jacksonville F1 3288 City/State and Zip Code
Johny Valcourt @ me - con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Johnny Valcairt 11,407, 808 1071
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) S60.00 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



JL North East La	2021 JAN 28 AM 6:50
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L20006233694}$.	were filed on $\frac{8 2 2020}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1311 Biscayne Grave Lane
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FI 32218
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1311 Biscayne Grove Lane Jacksonville, Fl 32218
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: Johnn	y Valcourt
New Registered Office Address: 1311 B	Scarne Grove Lo Enter Florida street address
Jackson	Wille Florida 32218 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, Aignature 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 = A	Authorized Member	2004	
<u>Title</u>	<u>Name</u>	2021 JAN 28 AM 6: 50	Type of Action
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	ific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, s not meet the applicable statutory filing requirements, this date will not be liste
cord specifies a delayed effective date, b s filed.	out not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
ed D1-12-2021	
Yaan	e of a member or authorized representative of a member
	\cdot " V

Filing Fee: \$25.00