## Division of Corporations Note: Please print this page and use it as a cover sheet. Type the fax audit number

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(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX ZONE INC. Account Number : I20190000044 Phone : (407)888-3131 Fax Number : (888)453-0509

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUPREME LOGISTICS LLC

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## COVER LETTER

TO: Registration Section Division of Corporations SUPREME LOGISTICS LLC SUBJECT: 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: WOODLY JACQUES Name of Person SUPREME LOGISTICS LLC Firm/Company 4207 LUGANO CT Address KISSIMMEE, FL 34746 City/State and Zip Code ACCOUNTANT@TAXZONEFL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 624-1947 WOODLY JACQUES Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30.00 Filing Fec & ☐ \$55.00 Filing Fcc & □ \$60.00 Filing Fee, ■ \$25.00 Filing Fee Certified Copy Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) (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

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUPREME LOGISTICS LLC		
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our re sility Company)	cords.)
(A FORME Edition Edition	ant, company)	
The Articles of Organization for this Limited Liability Company wo	ne filed on 10/01/2020	and assigned
Florida document number 1.20000319594		
Florida document mumber		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y 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:		
(Principal office address MUST BE A STREET ADDRESS)		
·	<del></del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office add	lress on our records, <u>er</u>	ter the name of the new registered
agent and/or the new registered office address here:	_	
Mana a C Mary Danistanul Agaist		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ldress
		Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent;		
		I C. al
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe	to act in this capacity.	I jurther agree to comply with the
accept the obligations of my position as registered agent as pro	vided for in Chapter 6	05. F.S. Or. if this document is
being filed to merely reflect a change in the registered office ad	dress, 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

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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

Tit <u>le</u>	Name	Address	Type of Action
AMBR	LUCSON JEAN	4207 LUGANO CT	
		KISSIMMEE, FL 34746	
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cord specifies a delayed i filed.	effective date, but	not an effective	time, at 12:01 a	.m. on the carli	er of: (b)	The 90th d	ay after th
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