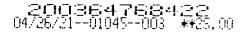
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration Se Division of Cor | ection porations | | |
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| | ISTICS LLC | | |
| SUBJECT: | Name of Limit | ted Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are subr | nitted for filing. | |
| Please return all correspo | ondence concerning this matter t | to the following: | |
| | Adrian Thompsonn Jr | | |
| | | Name of Person | |
| | NSM LOGISTICS LLC | | |
| | | Firm/Company | |
| | 748 W 1st st | | |
| | | Address | |
| | Riviera Beach, FL 33404 | | |
| | Adrian 11509@hatmail.com | City/State and Zip Code | |
| | Adrian l 1598@hotmail.com E-mail address: (| to be used for future annual report notif | ication) |
| For further information | concerning this matter, please ca | ali: | |
| Adrian Thompson Jr | | 561 229-8405 | |
| Name of Person | | | e 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 Addr Registration Division of P.O. Box 63 Tallahassee | Section Corporations 327 | Street Address: Registration Second Division of Coron The Centre of Toron 2415 N. Monro Tallahassee, FL | porations Fallahassee e Street, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| NSM LOGISTICS LLC | | |
|--|--|--------------------------------|
| (Name of the Limited Lia (A Flo | bility Company as it now appears on our record rida Limited Liability Company) | <u>(s.</u>) |
| The Articles of Organization for this Limited Liability Florida document number L21000011525 | y Company were filed on 01/01/2021 | and assigned |
| his amendment is submitted to amend the following | ; | |
| A. If amending name, enter the new name of the l | imited liability company here: | 202 |
| he new name must be distinguishable and contain the words " | Limited Liability Company," the designation "LLC | |
| Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET AD</u> | | 26 |
| Enter new mailing address, if applicable: | | 9: LO |
| Mailing address MAY BE A POST OFFICE BOX | nust be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" rincipal offices address, if applicable: Company | |
| B. If amending the registered agent and/or registence agent and/or the new registered office address here. | | r the name of the new register |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street addre | ess |
| | | lorida |
| | 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> | <u>Name</u> | Address | l ype of Action |
|--------------|--------------------|-----------------------------------|-------------------------------|
| MGR | Adrian Thompson Jr | 748 w 1st Riviera Beach, FL 33404 | ■Add |
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| Effective date, if other | er than the date | of filing: | | | | _ (option | ıal) | | |
| (If an effective date is listed Note: If the date inser document's effective d | ted in this block do | es not meet th | ie applicable | te of filing or statutory fil | more than 90 ing requirem | lays after ti ents, this o | ling.) Pui date will | rsuant to 69 not be li | 05.020 sted a |
| ne record specifies a dele ord is filed. | ayed effective date | , but not an efi | fective time, | at 12:01 a.m | on the earl | ier of: (b) | The 90 |)th day af | ter the |
| | | 202 | 21 | | | | | | |