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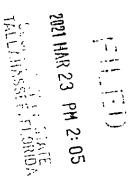
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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Solid Lo	CK Logistics	
MODSECT.	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Victo	Name of Person Rock Logist Film/Company	1
		Name of Person	
	Sol. d	ROCK LOGIS	rie S
	1451 NE	14844 5+ Address	
		City/State and Zip Code	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
	oncerning this matter, please ca	all:	
Victor J.	Dorcilien Treison	at (786) 430 Area Code Daytin	1 - 9853 e Telephone Mumber
Enclosed is a check for th	ne 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 Addres Registration S	Section	Street Address: Registration Se	
Division of C P.O. Box 632		Division of Col The Centre of I	-
Tallahassee, l			e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Solid Rock Log	istics , LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our recor ability Company)	<u>ts.</u>)
The Articles of Organization for this Limited Liability Company v Florida document number <u>LALODOU3425</u> 6	were filed on	1202 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	7900 Dak Suite 400	
Parameter address if applicables	Miani, Lakes	23106 L Lane
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Suite 400	
	Miami, La	2021
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>ente</u>	r the name of the new registered
Name of New Registered Agent:		2:
New Registered Office Address:	Enter Florida street addr	<u> </u>
		lorida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	i e de de de de la companya de la c	Couth on account to account with the
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 602	and I am familiar with and , F.S. Or, if this document is
If Char	nging Registered Agent, Signatur	e of New Registered Agent

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MGR = N AMBR = A	nepolitet Member Repolitet		
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f an effective date is lister Note: If the date inser	er than the date of filin l, the date must be specific an ted in this block does not ate on the Department of	d cannot be prior to date meet the applicable s	of filing or more that tatutory filing requ	(option 190 days after firements, this	ili <mark>ng.)</mark> Pur	rsuant to 60 not be lis	5.0207 ted as (
record specifies a def d is filed.	nyed effective date, but no	n an effective time, a	12:01 a.m. on the	earlier of: (b)	The 90	th day aft	er the
Dated UL	117	, 2021 .					
	Signature of a	member or authorized	representative of a m	ember			
		Typed or printed nam	2.0				