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Division of Corporations

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

Email Address: RLOPS@PARASEC.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN W & R-WARD LOGISTICS "LLC"

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Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	-WARD LOGISTICS "LLC"	
(Name of the Limited Liab) (A Florid	lity Company as it now appears on our record a Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability (Company were filed on 01/22/2021	and assigned
Florida document number <u>1.21000043529</u>	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "En	mited Liability Company," the designation "LLC	C" or the abbreviation "L.I. C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
		<i>'</i> 0 , ≥
		22
Enter new mailing address, if applicable:		∴ AUG
(Mailing address MAY BE A POST OFFICE BOX)		13 13
B. If amending the registered agent and/or regi		- CO
B. If amending the registered agent and/or registered agent and/or the new registered office add	istered office address on our record dress here:	ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	56)
<u></u>		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 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>	Name	Address	Type of Action
AMBR	RAYDIRI VELETTE WARD	2375 NE 175RD ST	
		NORTH MIAMI, FL 33160	☐ Remove
		· 	☐ Change
			
			□ Remove
			□ Change
			Remove
			Change
		·	□ Remove
			□ Change
			□ Remove
			☐ Change
			□ Remove
			□ Change

We a	re changing the spelling of a memb	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.) nging the spelling of a member. Her name should be RAYDIRI VELETTE WARD, We are also switching for E to be a member and it is just going to be managed by both of them as members				
		•				
E. Effec	tive date, if other than the c	late of filing:	(optional)			
(If an e	effective date is listed, the date must	be specific and cannot be prior to date of filing or more ck does not meet the applicable statutory filing r	than 90 days after filing.) Pursuant to 605.0207 (3)(b)			
	ment's effective date on the Dep		equirements, viils date with not be fished as the			
		effective date, but not an effective tim	ne, at 12:01 a.m. on the earlier of:			
(D) IN	e 90th day after the reco	ra is filea.				
Davis	d May 20	2021				
Date	d					
			C.			
		Signature of a member of authorized representative of	a member			
			A A			
	Wingrove Ward	Typed or printed name of signee	a member 2881 AUG 1 3			
			رت لیا			
		Page 3 of 3	erios 🏯			
		Filing Fee: \$25.00	STATE DE			
		rining ree, \$45.00	Service Servic			