L21000077845

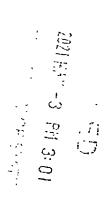
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COVER LETTER

TO: Registration S Division of Co					
	GISTICS AND DISPATCHING	GLLC	A		
SUBJECT:	Name of Lim	ned Liability Company	<u>- Y</u>		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MICHELLE RODRIGUEZ	<u>y</u>			
		Name of Person			
	MARS LOGISTICS AND	DISPATCHING LLC			
	Firm/Company				
	579 SW JEANNE AVE				
		Address			
	PORT SAINT LUCIE, FL	, 34953			
	michsaintil@gmail.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report notif	fication)		
For further information	concerning this matter, please c	all:			
MICHELLE RODRIGUEZ		786 489-8433			
Name of Person		Area Code Daytim	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 Addre Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARS LOGISTICS AND DISPATCHING LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{02/15/2021}{1}$ Florida document number L21000077845 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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.

Enter Florida street address

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	Type of Action
AMBR	RICHARDSON SAINTIL	579 SW JEANNE AVE	= Add
		PORT SAINT LUCIE, FL.34953	_
			□Change
			□ Add
			□Remove
			□Change
			□Add
		-	□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□ Change
			□Add
			🗆 Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,) E. Effective date, if other than the date of filing: $\frac{(44/27/202)}{2}$ _ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated APRII, 27 MICHELLERODRIGHEZ

Typed or printed name of signee