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COVER LETTER

TO:	Registration Sec Division of Corp			
041 D 18		REIGHT LLC		
SUBJE	ECT:	Name of Limit	ted Liability Company	
		mendment and fee(s) are subn		
		SERGIO DAVID GIL JR	-	
		·	Name of Person	
		MGR		
			Pirm/Company	
		2503 33RD ST SW		
			Address	
		LEHIGH ACRES, FL 3397	76	
			City/State and Zip Code	
		GILSERGIO427@GMAIL.		
For fu	ther information co	E-mail address: (to incerning this matter, please ca	o be used for future annual report notifica ll;	uon)
SERG	IO DAVID GIL JR		239 316-8918 at ()	
	Name of	Person	Area Code Daytime To	elephone Number
Enclos	ed is a check for the	e following amount:		
■ \$2	5.00 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 ADDRESS:

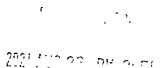
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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



MIDWAY FREIGHT 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 I	iability Company	were filed on FLOI	RIDA 3 10 2 and assigned				
Florida document number L21000115462	<u> </u>						
This amendment is submitted to amend the fol	lowing:						
A. If amending name, enter the new name	of the limited liab	ility company here	;				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if appli	cable:	2503 33RD ST SW					
(Principal office address MUST BE A STRE		LEHIGH ACRES, FL 33976					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>: BOX)</u>	2503 33RD ST SW LEHIGH ACRES, FL 33976					
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	d/or registered of office address her	<u>e</u> :	our records, enter the name of the no				
New Registered Office Address:	2503 33RD ST						
		a street address					
	LEHIGH ACR	ES	Florida 33976				
		City					

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	SERGIO DAVID GIL RUIZ	2503 33RD ST SW	
-	-	LEHIGH ACRES, FL 33976	□ Remove
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		<u></u>	Add
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Note:	tive date, lective date If the dat nent's effe	e inserted	d in this	block do	oes not r	neet the	e applica	o date of fi ble statut	ling or me ory filing	ore than 90 requiren	(opti days after eents, thi	o nal) rtiling.) P s date wi	ursuant to 60 If not be lis	05.020 sted as
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		3		Signa	ture of a	member	r or autho	rized repre	sentative	of a memb	ег			

Page 3 of 3

Filing Fee: \$25.00