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## **COVER LETTER**

TO: Registration Se Division of Cor					
OLIN IDAY	MAINSTREAM LOG	ISTICS, ELC			
SUBJECT:	t Name of Lin	nited Liability Company		<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	SHAKERA FREEMAN				
		Name of Person		·····	
	MAINS	STREAM LOGISTICS	, LLC		
		Firm/Company	<u></u>		
	3432 ALISSA CT				
		Address		<del></del>	
	ORLANDO, FL 32808				
	<del></del>	City/State and Zip Co	de		
	mainstreamlogisticsIlc1@g	mail.com to be used for future ann			
For further information c	oncerning this matter, please e		на тероссполнеано	1)	
SHAKERA FREEMAN		407 at ()	780.2725		~ '^;
Name o	f Person	Area Code	Daytime Telep	phone Number	1,2
Enclosed is a check for the	ne following amount:			22.	:
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fo Certified Copy tadditional copy is		\$60,00 Filing Fee. Certificate <u>rof</u> Statu Certified Copy (additional Copy is encl	
<u>Mailing Addres</u> Registration S			Address: stration Section		
Division of Corporations		Divis	sion of Corporat		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 \_\_\_\_\_\_ and assigned

Florida document number \_\_\_\_\_

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)

New Registered Agent's Signature, if changing Registered Agent:

agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

MAINSTREAM LOGISTICS, LLC

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.

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered

<del></del>			
If Changing Registered Agent, Signature of	f New	Registered Agent	

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>	Name	Address	Type of Action
MGR	SHAKERA FREEMAN	3432 ALISSA CT STE C ORLANDO, FL 32808	□Add
			□Remove
			<b>≣</b> Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 🗆 🗆
			☐ Remove
			☐Change
			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: \_ \_ (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. 2021 Dated\_ Signature of a member or authorized representative of a member SHAKERA FREEMAN

Typed or printed name of signee