L21000215097

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	orporations					
BC LOGI	STICS & SERVICES LLC					
	Name of Li	nited Liability Company				
		. ,				
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.				
		_				
rieuse return an corresp	ondence concerning this matte	r to the following:				
	Christopher Charles					
	,					
		Name of Person				
	BC LOGISTICS & SERV	TCES LLC				
		Firm/Company				
	21413 NW 13TH CT API	1507				
		Address				
	MIAMI, FL 33169					
		20. 112				
		City/State and Zip Code				
	12					
		to be used for future annual report no	otification)			
For further information of	concerning this matter, please c	al i :				
Christopher Charles		786 622-4745				
		at ()				
Name of Person		Area Code Dayti	me Telephone Number			
Englaced is a shoot for a	C. H					
Enclosed is a check for the	ie tottowing amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Fifing Fee &	□ \$60.00 Filing Fee,			
	Certificate of Status	Certified Copy	Certificate of Status &			
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)			
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Mailing Addres	<u>s:</u>	Street Address:				
Registration S			Registration Section			
Division of C		Division of Co				
P.O. Box 632	7	The Centre of				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BC LOGISTICS & SERVICES 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 ____ and assigned Florida document number ______ 1.21000215097 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: Christopher Char 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.

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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
MGR	Christopher Charles	21413 nw 13th et apt 507	
			= Add
		Miami, FL33169	
			□Remove
			□Change
			□Remove
			□Change
			
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
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			□Change
			□Add
			□Remove

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Effective date i	f other than the d	la cer				
If an effective date i Note: If the date	s listed, the date must I	be specific and cann ok does not meet t	ne applicable stati	filing or more than 9 story filing require	(optional)) days after filing.) Purments, this date will	suant to 605,0207 not be listed as
e record specifies rd is filed.	a delayed effective	date, but not an ef	fective time, at 12	:01 a.m. on the car	lier of: (b) The 90	th day after the
June 15		20	21			
Dated		·/ }	· /			
		1 XA	1	- 		

Typed or printed name of signee