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(Address)
,
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COVER LETTER

TO:

то:				
CHD ID	CT.	USA ALLIANCE CARGO I	LLC	
SUBJE		Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please 1	return all correspo	ndence concerning this matter	to the following:	
			ANDRES MONROY	
ANDRES MONROY Name of Person Firm/Company 150 SE 2ND AVENUE SUITE 1005 Address MIAMI, FL 33131 City/State and Zip Code ACCOUNTING@MONROYCOPA.COM E-mail address: (to be used for future annual report notification)				
	Division of Corporations USA ALLIANCE CARGO LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filling. Date of Person Firms Company 150 SE 2ND AVENUE SUITE 1005 Address MIAMI, FL 33131 City/State and Zip Code ACCOUNTING@MONROYCOPA.COM E-mail address: to be used for future annual report notification) r further information concerning this matter, please call: ANDRES MONROY Name of Person Area Code Daytime Telephone Number closed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee \$20.00 Filing Fee & Certificat Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Registration Section Registration Section			
		15	0 SE 2ND AVENUE SUITE 1009	5
			Address	
			MIAMI, FL 33131	
		100	•	
			_	
For furt	her information co	oncerning this matter, please ca	all:	
	ANDRES	MONROY		
	Name of	f Person	Area Code Daytin	ne Telephone Number
Enclose	ed is a check for th	e following amount:		
■ \$ 25	5.00 Filing Fee		Certified Copy	Certificate of Status &
	Registr			on

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USA ALLIANCE O	CARGO LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document numberL21000266614 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab		and assigned	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable:	1627 NW 84TH AVENUE		
(Principal office address MUST BE A STREET ADDRESS)	DORAL, FL 33126		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of	DORAL, FL 33126		
registered agent and/or the new registered office address her Name of New Registered Agent:		r-2	
New Registered Office Address:	Enter Florida street address	<u> </u>	
	, Florida	Zin Corti	
New Registered Agent's Signature, if changing Registered Agent:	•	Zip Corto	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am j provided for in Chapter 605, F.S. Or,	amiliar with and if this document is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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
MGR	ANDRES MONROY	150 SE 2ND AVE SUITE 1005	
		MIAMI, FL 33131	2 /\dd
			■ Remove
			Change
MGR	GUILLERMO D. SIMOVICH	1627 NW 84TH AVE	
•		DORAL, FL 33126	
			Remove
		 	Change
			Add
			□ Remove
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(If an effect Note: If	e date, if other than the date of filing:)207 (3 d as th
the reco) The 9	and specifies a delayed effective date, but not an effective time, at $12:01~a.m.$ on the earlies $00th$ day after the record is filed.	r of:
Dated	OCTOBER 12 2021	
	Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00