## L21000300360

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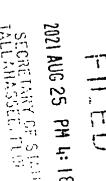
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## **COVER LETTER**

TO:

Logistics	LLC	
Amendment and fee(s) are submitted for filing- andence concerning this matter to the following:  LUIS E AQUINO Name of Person  AQUINO LOGISTICS LLC Firm*Company  HOL SW TOTA LET Address  Pemblike Pines FL 33023 City/State and Zip Code AQUINO GLOSISTIC (to be used for future annual report notification)  concerning this matter, please call:  AQUINO at Code Area Code  S30.00 Filing Fee & Certified Copy tadditional copy is enclosed)  Sirect Address:  Registration Section Corporations  Sirect Address:  Registration Section Division of Corporations The Centre of Tallahassee		
endment and fee(s) are sub-	nitted for filing.	
nce concerning this matter	to the following:	
Luis	E Aquino Name of Person	
Aguino L	C9.5t.C5 LLC Firm/Company	
401 5W 70	th tell Address	
Pembroke i	Pines FL 33 City/State and Zip Code	023
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ollowing amount:		
	Certified Copy	Certificate of Status & Certified Copy
porations	Registration Se Division of Cor The Centre of T 2415 N. Monro	porations fallahassee e Street, Suite 810
	Aquino Filing Fee & Certificate of Status	endment and fee(s) are submitted for filing.  Ince concerning this matter to the following:  Luis E Aquino Name of Person  Aquino Logistics LLC  Firm/Company  HOLSW TOTAL FL  Address  Pembroke Pines FL  City/State and Zip Code  Aquino Logistics (to be used for fature annual report noticerning this matter, please call:  Aquino at (Hb) 307-  Area Code Daytim  Street Address:  Registration Septivision of Contractions  Street Address:  Registration Septivision of Contractions

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2021 AUG 25 PM 4: 19

	SECRETARY OF STATE
(Name of the Limit	A Florida Limited Liability Company)
	ability Company were filed on $6-30-20\%$ and assigned
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	BOX)
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office address on our records, <u>enter the name of the new regist</u> ess here:
Name of New Registered Agent:	Elias moises Aquino
New Registered Office Address:	401 5W 70 tell B  Enter Florida street address
	Pembroke Pines, Florida 33023  Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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. If amending any oth	er information,	enter change(s	) here:	(Attach additional s	heets, if nece	ssary.)
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2. Effective date, if oth (If an effective date is listed Note: If the date inser document's effective d	ted in this block (	does not meet the	applical	date of filing or more the	(optic an 90 days after uirements, this	filing.) Pursuant to 605.0
the record specifies a del cord is filed.	ayed effective dat	e, but not an effe	ctive tin	ne, at 12:01 a.m. on the	e earlier of: (b	) The 90th day after
Dated <u>8</u> - 18		20	21			
			<u> </u>			
	Sign	nture of a member	or author	ized representative of a r	nember	
	<u>LE</u>	15 E	A C	1 name of signee		
		131/00	~ · 10 mm/			