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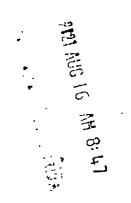
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: MCX	Name of Limited	Logistics,	LLC.
The enclosed Articles of Amendment :	nd fee(s) are submitte	ed for filing.	
Please return all correspondence conce	rning this matter to th	e following:	
	Naom	Name of Person	
	McK	nney Legista	cs, lec
<u> 20</u>	515W VI	lanoua Rd Address	
Pov	DE NA	Ty/State and Zip Code AOMI (P) 9	FL 34953 mail. com
For further information concerning this		used for future annual repr	n no(meanon)
Name of Person	matter, prease can.	at (\(\sigma\) \(\frac{Q}{1}\)	381648 Daytume Telephone Number
Enclosed is a check for the following a	nount:		
	filing Fee & — — — — — — — — — — — — — — — — — —	2 \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
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 (A Florida Limited Lia	ras it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w Florida document number $\frac{L21000342937}{L}$.	were filed on $\frac{199}{100}$
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
The new name must be distinguishable and contain the words "Limited Liability	v Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· • • • • • • • • • • • • • • • • • • •
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	· F
(Mailing address MAY BE A POST OFFICE BON)	·
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida Ciw

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

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
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<u>ote:</u> 11 (1)	the date inserted in this block seffective date on the Deng	anaem or singe				
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