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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SOUTH SUBJECT:	PACIFIC FREIGHT SERVICES	S LL.C	
	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	OSCAR A ENCISO		
		Name of Person	
	SOUTH PACIFIC FREIG	HT SERVICES LLC	
		Firm/Company	
	8214 NE 14 STREET		
		Address	
	DORAL, FL 33126		
		City/State and Zip Code	
	E-mail address	(to be used for future annual report no	ification)
For further information	on concerning this matter, please of		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
OSCAR A ENCISO	Treating this matter, presses	305 733-9170	. /
	ne of Person	at ( )	ne Telephone Number
14dii	ic of reison	7.000	
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	: □ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	on Section f Corporations	Street Address: Registration Son Division of Control The Centre of 2415 N. Monor Tallahassee, F	rporations Tallahassee ne Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COURTH DACHERC EDERCHT SEDVICES LLC

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

(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 $\frac{07/29/2021}{\text{L21000343673}}$	and ass	signed
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 "L	L.C."
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, <u>enter the na</u>		
gent and/or the new registered office address here:		
		$C_{i}$
Name of New Registered Agent:		<del></del>
New Registered Office Address:  Enter Florida street address	<del>:</del>	
Florida	. •	i
, Florida City	Zip Code	,

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 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
AMBR	OSCAR A ENCISO	8214 NW 14 STREET, DORAL, FL 33126	🗆 Add
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			■ Change
			□ Add
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			Change
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		<del></del>	Remove
			□Change ()
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