Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAXMY'S CARRIER SERVICES

Account Number : I2004000007

Phone : (305)640-0281

Fax Number

: (305)489-2902

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **UX LOGISTICS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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Electronic Filing Menu Corporate Filing Menu

Help

From: LAXMY CHACON

COVER LETTER

TO: Registration S Division of Co			
UX LOGI	STICS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	DIEGO GUANI		
		Name of Person	
	UX LOGISTICS LLC		
		Firm/Company	
	5601 COLLINS AVE STE	2 515	
		Address	
	MIAMI BEACH, FL 3314	10	
		City/State and Zip Code	
	LAXMYSCARRIERI@G	MAIL.COM to be used for future annual report noti	tiention \
For further information	concerning this matter, please of	·	neamony
LAXMY CHACON		305 640-0281	
Name	of Person	at () Area Code Daytim	c Telephone Number
,	51.07.23.1		
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations 'allahassee e Street, Suite 810

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UX LOGISTICS LLC		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records da Limited Liability Company)	2)
The Articles of Organization for this Limited Liability	Company were filed on 10/05/2021	and assigned
Florida document number L21000436607	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited 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 ADE	ORESS)	
		(2)
Enter new mailing address, if applicable:		TALL TALL
(Mailing address MAY BE A POST OFFICE BOX)		が変え
		\$ 8 /
B. If amending the registered agent and/or register	ed office address on our records, enter t	he name of the construction of
agent and/or the new registered office address here	onice and co. Miles i	52
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street addiess	
		rida
	City	Zip Code

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

To:

From: LAXMY CHACON

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
AMBR	SARA E. CAPOTE	1950 W 54TH ST APT 301	
		HIALEAH, Fl. 33012	□Remove
			[]Change
			□Add
	***************************************	□Remove	
		· · · · · · · · · · · · · · · · · · ·	□Change
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			□Change

Effective date, if other than the date of filing: (optional) If an effective date is listed, the date must be specific and cannot be prior to date of liting or more than 90 days after filing.) Properties of the date inserted in this block does not meet the applicable statutory filing requirements, this date with document's effective date on the Department of State's records.	
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record specifies a delayed effective date, but not an effective time at 1200 Language and a contract of the co	ursuant to 605,0201 If not be listed as
d is filed.	0th day after the
Dated September 107th 2002	
Addith	
Fignature of a member or authorized representative of a member	