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COVER LETTER

•	ision of Cor					
SUBJECT:		d Managed Transportation and	Logistics, LLC			
Name of Limited Liability Company						
The enclosed	i Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	ı all correspo	ndence concerning this matter	to the following:			
		Scott Williams				
			Name of Person			
	Warp Speed Logistics Consulting, LLC					
	FirmyCompany					
		3512 Guppy Ct				
			Address			
		Jacksonville, FL 32226				
		···	City/State and Zip Code			
		scott@warpspeedmtl.com	to be used for future annual report no	-16		
For further is	nformation c	oncerning this matter, please ea	•			
Scott Willia	ms		904 553-7386			
	Name o	f Person	at () Area Code Daytir	ne Telephone Number		
Enclosed is	check for th	ne following amount:				
■ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	iling Addres		Street Address:			
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Warp Speed Managed Transportation and Logistics, LLC

2023 AUG 14 PM 12 21

(Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on $\frac{11/1/2021}{1}$ _____ and assigned Florida document number L21000473713 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Warp Speed Logistics Consulting, LLC 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 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
			□Add
			Remove
			□Change
			□ Change
			□Add
			□Remove
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			□Remove
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			Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. 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 filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. 2023 Signature of a member authorized representative of a member Scott Williams Typed or printed name of signee