L21000498751

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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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T. MATTHEWS MAR 24 2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BRADLEY & Name of Limit	EDEN LOGISTICS LLC ited Liability Company
The enclosed Articles of Amendment and fee(s) are sub-	-
Please return all correspondence concerning this matter	to the following:
Rosny	BRADLEY DANIEL Name of Person
	Firm/Company
3703 NU	V 37 th St. Address
FORT LAUD	ERPALE, FL 33309 City/State and Zip Code
	19 @ YAHOO. COM to be used for future annual report notification)
For further information concerning this matter, please or	all:
Rosny DANIEL	at (<u>305</u>) <u>992 - 0242</u> Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee Fl 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRADLEY & EDE	N LOGIS	TICS LLC	2: 5 3
(<u>Name of the Limited Liability Con</u> (A Florida Limite	npany as it now appears ed Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Compa	iny were filed on	11-19-21	_ and assigned
Florida document number <u>L 21006 498 751</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	iability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the de	esignation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		· · ·	
(Principal office address MUST BE A STREET ADDRESS)	2	<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			<u> </u>
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our re	ecords, <u>enter the name c</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
	City	, Florida	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 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
President	ROSNY DANIEL	3703 NW 37st.	X ⁱ Add
		FORT LAUDERDALE, FL 33	3 <u>30</u> 9 Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			□ Change
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			□Remove
			□Change

7	Please add the FEITEIN number
	EIN # 87 - 3730014
_	
(If an effective Note: If the	date, if other than the date of filing:
he record sp ord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	3-10 <u>2022</u> NKriscus
	Signature of a member or authorized representative of a member
	Kristina Vazareva Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)