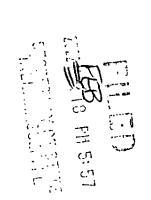
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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D. BRUCE FEB 2 8 2022

COVER LETTER

Division of Co	rporations			
CHDIEZT.	DIVINE PATH LOGISTIC	S, LLC.		
SUBJECT:	Name of Lin	iited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	RONAY BLOOM			
		Name of Person		
		Firm/Company		
	2114 N. FLAMINGO RO	AD UNIT 2158		
		Address		
	PEMBROKE PINES, FL.	33028		
	MSBLOOM1114@GMAH	City/State and Zip Code		
		to be used for future annual report notific	ation)	
For further information of	concerning this matter, please c	aH:		1
RONAY BLOOM		305 967-2513		
Name o	of Person	Area Code Daytime T	Felephone Number	
Enclosed is a check for t	he following amount:		7	
■ \$25.00 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)	

TO:

Registration Section

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

DIVINE PATH LOGISTICS, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 01/18/2022 The Articles of Organization for this Limited Liability Company were filed on _ and assigned Florida document number _ L22000032917 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 "LLC." 2114 N. FLAMINGO ROAD Enter new principal offices address, if applicable: **UNIT 2158** (Principal office address MUST BE A STREET ADDRESS) PEMBROKE PINES, FL 33028 2114 N. FLAMINGO ROAD Enter new mailing address, if applicable: **UNIT 2158** (Mailing address MAY BE A POST OFFICE BOX) PEMBROKE PINES, FL 33028 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.

Cire

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 TAMIA JOHNSON	TAMIA JOHNSON	2114 N. FLAMINGO ROAD	■Add
		UNIT 2158	□Remove
		PEMBROKE PINES, FL 33028	□ Change
			[]Add
			□Remove
			□Change
		-	□ Add
			□ Remove
			UGhange.
			□ Removes □
			☐Change
			□Add
			□Remove
			☐ Change
			□ Add
			□Remove
			□ Change

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(If an effec	re date, if other than the date of filing: (optional) tive 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 (I filthe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that it is effective date on the Department of State's records.
he record ord is file	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 d.
Dated _	February 10 . 2022 . Howard Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member RONAY BLOOM
	Typed or printed name of signee