LZZ000040505

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2022 MAR -4 AM 9: 36
SECRETARY OF STATE

A. BUTLER MAR 14 2022

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	rporations		
Jewel Logi SUBJECT:	stics LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	•	
	Davida Reid		
		Name of Person	
	Go Jewel Logistics LLC		
		Firm/Company	
	711 71 4	i iniv company	
	711 7th Ln		
		Address	
	Greencres, FL, 33463		
	المستام المستا	City/State and Zip Code	
	davida@gojewellogistics.co E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Davida Reid		561 843-8689 at ()	
Name of Person			ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$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)
Mailing Addres		Street Address:	ation
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Jewel Logistics LLC

company has been notified in writing of this change.

2022 MAR -4 AM 9: 36

(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 O1/20/2022 TALLARY SEE, III and assigned Florida document number L22000040505 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Go Jewel Logistics LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 401 N Rosemary Ave, Enter new principal offices address, if applicable: West Palm Beach, FL 33401 (Principal office address MUST BE A STREET ADDRESS) 401 N Rosemary Ave, Enter new mailing address, if applicable: West Palm Beach, FL 33401 (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 , Florida __ City 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

If Changing Registered Agent, Signature of New Registered Agent

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
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			□Remove
			□Change
			
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Dated _	March	154	,	2027	<u>. </u>				
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