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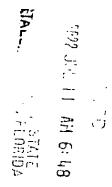
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Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·

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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
GLOBAL >	(LOGISTICS LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ndence concerning this matter	Position of Limited Liability Company endment and fee(s) are submitted for filing. Ince concerning this matter to the following: ALEXANDRA LOZANO Name of Person Firm/Company 3305 W ATLANTIC BLVD Address CORAL SPRINGS, FL 33071 City/State and Zip Code Bernall address: (to be used for future annual report notification) Tring this matter, please call: at (
	ALEXANDRA LOZANO		
		Name of Person	
		Firm/Company	
	8305 W ATLANTIC BLV	′D	
	-	Address	
	CORAL SPRINGS, FL 3	33071	
		City/State and Zip Code	
	maxi8317@aol.com		
For further information or		•	ification)
		au:	
ALEXANDRA LOZANO)		
Name of	Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for the	e following amount:		
	□ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
Mailing Address		Street Address:	
Registration S Division of Co		-	
P.O. Box 6327		Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLOBAL X LOGISTICS LLC			2022	
(Name of the Limit	ed Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	75	
The Articles of Organization for this Limited Li Florida document number L22000040802 This amendment is submitted to amend the following the content of the	ability Company were filed on 02		and assigned AN 6: 48	115 US
A. If amending name, enter the new name of	the limited lighility company b	0200	<u> </u>	
I smelleng hame, ener the new hame of	пис пинед наовису сотрану в	ere:		
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the	designation "LLC" or the ab	breviation "L.L.C."	_
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE				_
				-
				_
Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE	<u></u>			_
				_
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office address on our r s here:	ecords, <u>enter the nam</u>	e of the new registe	<u>ered</u>
Name of New Registered Agent:	ALEXANDRA LOZANO	<u> </u>	<u>. </u>	_
New Registered Office Address:	8305 W ATLANTIC BLVD			
	Enter Flor	rida street address		-
	CORAL SPRINGS	, Florida ³³⁰	071	
	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

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
			□Add
			□ Remove
			□Change
		-	🗆 Add
			□Remove
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Filing Fee: \$25.00