

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**L22000170599 192150**

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GONZALEZ & ASSOCIATES III PA
Account Number : I20190000077
Phone : (954)773-7286
Fax Number : (954)526-8825

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: agonzalez@amefinancialgroup.comLLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ORANGE MIAMI LOGISTIC LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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2022 MAY 12 PM 1:57

May. 12. 2022 1:43PM

AME Financial Group

No. 0183 P. 2

COVER LETTER

TO: Registration Section
Division of Corporations

H220001705993

SUBJECT: ORANGE MIAMI LOGISTIC LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTONIO GONZALEZ

Name of Person

GONZALEZ & ASSOCIATES III PA

Firm/Company

1820 N CORPORATE LAKE BLVD SUITE 107

Address

WESTON, FL 33326

City/State and Zip Code

agonzalez@amefinancialgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO J. GONZALEZ

954 773-7286
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

H220001705993

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

H220001705993

ORANGE MIAMI LOGISTIC LLC

(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 FLORIDA and assigned
Florida document number L22000192150.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

_____, Florida _____
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

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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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	CARLOS E NARANJO GARCIA	17653 SW 47th ST	<input checked="" type="checkbox"/> Add
		MIRAMAR, FL 33029	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CARLOS E NARANJO MEJIA	17653 NW 47th ST	<input type="checkbox"/> Add
		MIRAMAR, FL 33029	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

Dated MAY 11 2022

Signature of a member or authorized representative of a member

CARLOS ENRANJO

Typed or printed name of signee

H 220001705993

Filing Fee: \$25.00