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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ATESIANO TAX SERVICES

Account Number : I20190000123

: (305)928-1137

Fax Number : (786)349-4952

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

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GATEAWAY LOGISTICS USA LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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GATEAWAY LOGISTICS USA LLC		
(Name of the Limited Liability Company as i (A Florida Limited Liability)	t now appears on our records.) y Company)	
The Articles of Organization for this Limited Liability Company were	filed on 04/26/2022	and assigned
Florida document number <u>L22000197900</u> .		
This amendment is submitted to amend the following:		;
A. If amending name, enter the new name of the limited liability o	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Con	npany," the designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	·····	
_		· · · · ·
Inter new mailing address, if applicable:	·	
Mailing address MAY BE A POST OFFICE BOX		
		
b. If amending the registered agent and/or registered office addressent and/or the new registered office address here:	s on our records, enter the na	me of the new regi
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		·
	Enter Florida street address	
	, Florida	¥5 T
Ci	ity	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

230001859743 ÷

<u>Title</u>	, <u>Name</u>	Address	Type of Action
MGR	Gustavo Aguilera Sr	2132 Druid Rd E	□Abd
		Apt 1103	⊠ Rcmove
		Clearwater FL 33764	Change
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•	•		□ Remove
			□Change
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Erick Velasque						
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