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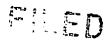
COVER LETTER

TO:

TO: Registration Se Division of Cor				
	STICS & TRANSPORT LLC	·		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JUAN CARLOS PEREZ O	CLEMENTE		
		Name of Person		
	Juan	C. Pers		
	1510 WOODLYN DR	Finn/Company		
		Address	The state of the s	
	LEESBURG FL 34748			
		City/State and Zip Code		
	kiwifraga1715@gmail.com			
	E-mail address; (to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please c	all:		
juan carlos perez clemen		352 4109785		
Name o	f Person	Area Code Daytim	e 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 Address		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 632	-	The Centre of T		
Tallahassee, l	FL 32314		e Street Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FFA LOGISTICS & TRANSPORT, LLC

2022 JUN 28 PH 2: 09

(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 MAY 05.	2022 and assigned
Florida document number L22000213366		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
FFA LOGISTICS & TRANSPORT LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1510 WOODLYN DR	LEESBURG FL34748
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	1510 WOODLYN DR	LEESBURG FL 34748
(Mailing address MAY BE A POST OFFICE BOX)		
	44	and the control of the control of the
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	idaress on our records	, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	t address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	·	
Thereby accent the appointment as registered agent and agr.		

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. Ov, 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.

fective date, if other than the date of filing: (aptional) (aptional)			-			
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