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PICK-UP	Mait	MAIL
(Bı	usiness Entity Name)	
(D.	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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A. BUTLER

JAN - 3 2023

## **COVER LETTER**

TO:

	Registration Se Division of Cor				
arib m		LOGISTICS LLC			
SUBJEC	.1:	Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		JEREMY MARTINS			
		<del></del>	Name of Person		
		SAPIENS LOGISTICS LI	.c		
			Firm/Company	<del></del>	
		409 NW 13TH AVENUE			
			Address		
		FORT LAUDERDALE, F	L 33311		
			City/State and Zip Code		
		sapienslogisticslle@gmail.c	com to be used for future annual repor	r notification)	
For furth	er information c	e-mail address: (		it nouncation)	
	Y MARTINS	<u> </u>	901 832-04	76	
	Name o	of Person	at () Area Code D	aytime Telephone Number	
Enclosed	I is a check for t	he following amount:			
<b>■ \$2</b> 5.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address		Street Addre Registration		
Registration Section Division of Corporations		Division of	Division of Corporations		
	P.O. Box 632			of Tallahassee onroe Street, Suite 810	
	Tallahassee,	F に 323 L4	2410 IN. IVI	omor bucci, built bio	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 OCT -3 AM 8: 13

SAPIENS LOGISTICS LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.). OF STATE
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 06/20/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company." the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registere
Name of New Registered Agent:	

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

\_, Florida \_

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>	Name	Address	Type of Action
MANAGER	JEREMY MARTINS	409 NW 13TH AVENUE, FORT LAUDERDALE,	FL Add
		33311	□ Remove
			□Change
			□Add
			□Remove
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fective date, if other than the date an effective date is listed, the date must be ote: If the date inserted in this block becument's effective date on the Department.	specific and cannot be pr does not meet the app	ior to date of filing of licable statutory fi	nore than 90 days a ling requirements,	fter filing.) Pursuant to	605.0207 listed as
ecord specifies a delayed effective da is filed.	te, but not an effective	e time, at 12:01 a.n	n, on the earlier of:	(h) The 90th day	after the
SEPTEMBER 30TH	2022	·			
1 21					
Sig	nature of a member or au	ithorized representat	ve of a member		-
V					
JEREMY MARTINS					

Filing Fee: \$25.00