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COVER LETTER

TO:

ro: Registration S Division of Go			
SHRJF <i>C</i> T:	Natusha Transp	portation & Logistic	s LL(
	Name of Limi	ited Liability Company	•••
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Nata	Sha Neves Name of Person	
	Natas	sha Transportation Firm/Company	& Logistics LLC
	790 NE 46th Ct	Address	<u>. :</u>
	Dakland	Park, FL 33334 City/State and Zip Code	1
	Natasha E-mail address: (at logistics @ gmail. (0	n fication)
For further information	concerning this matter, please ca		
Natasha	Neves	at (<u>954</u>) <u>494</u> -	4678
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 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 Addre Registration		<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Cor	porations
P.O. Box 63 Tallahassee,		The Centre of T	`allahassee e Street, Suite 810
rananassee,	I L JZJ 14	2412 IV. MIUIIIO	c bireet, built 010

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Natasha Transportation & Logistics LLC Jame of the Limited Liability Company as it now appears of our factories) -2 PH 4: 49
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/26/22: SFF and assigned Florida document number __L 22000321766 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (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 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: New Registered Office Address: Enter Florida street address

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:

MCR = Manager

41(11)	Wianager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP	Joseph Reali	790 NE 46th Ct	C Add
		Oukland Park, FL 33334	🖾 Remove
			Change
MGR	Antonio Sergio Simus Neves	790 NE 46th C+	NAdd
	U	Oakland Park, FL 33334	
			Change
			□Add
			□Remove
			□Change
			🗅 Add
			□Remove
			□Change
			Remove
			□Change
			□Add
			□Remove
			□Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
_	
Note: If	tive date, if other than the date of filing:
the record : cord is filed	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 i.
Dated _	November 2nd, 2022.
	Signature of a member of authorized representative of a member
	Natasha Neves Typed or printed name of signee