## 422000329276

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	<i>f</i> )
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	·)
(Do	ocument Number)	-
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
Amend-	cc/cos	
	/ Office Use Only	



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SECRETARY OF STATE

OCT S. 8 JULY

## **COVER LETTER**

TO: Registration Division of C			
	SISTICS LLC :	,	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Maria Hernandez		
		Name of Person	
	ZY LOGISTICS LLC		
		Firm/Company	
	1616 Marsh Wood Drive		
		Address	
	SEffner FL, 33584		
	maria_hernandez91@yahoc	City/State and Zip Code	
		to be used for future annual report notific	cation)
For further informatio	n concerning this matter, please c	all:	
Maria Hernandez		813 458-6811	
Nam	e of Person	at () Area Code Daytime	Telephone Number
Enclosed is a cheek fo	r the following amount:		
□ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Add</u> Registratio		Street Address: Registration Sect	tion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZY LOGISTICS 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 7/25/2022 and assigned Florida document number 1.22000328276 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 "LLC." 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.

, Florida

If amording 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
MGR	Maria L Hernandez	1616 Marsh Wood Drin	/L <sub>≣Add</sub>
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fective date, if other to an effective date is fisted, th ote: If the date inserted acument's effective date	in this block does not	meet the applicable st	2 of filing or more than atutory filing requi	(optional) 90 days after filing.) Pur rements, this date will	rsuant to 605.0207 not be listed as
	d effective date, but no	t an effective time, at	12:01 a.m. on the	carlier of: (b) The 90	th day after the
ecord specifies a delayer is filed.					
is filed.		2022			
record specifies a delayed is filed.  August, 2 ated	Me	<i>i</i> — <i>i</i>	Con.	mber	

Typed or printed name of signce