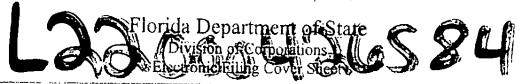
11/9/22, 6:05 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RICHARDS & PARTNERS, P.A.

Account Number : I20110000091 Phone

: (305)858-9900

Fax Number

: (305)285-0015

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CB FOREIGN TRADE CONSULTING LLC

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Page: 2 of 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CR FUREIGN TRADE CONSULTING LLC		
Name of the Limited Lightility Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Compar	ny were filed on October 3, 2022	and assigned
Florida document number L22(00426584		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
CB LOGISTICS & CONSULTING LLC		
the new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or t	the abbreviation "L.L.C."
		10,000
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
		22 A Cri
Enter new mailing address, if applicable:		9 9
(Mailing address MAY BE A POST OFFICE BOX)		33 6
		SSO
		S P M
B. If amending the registered agent and/or registered office	address on our records antar this	S S S
agent and/or the new registered office address here:	addition of records, enter the t	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street with ess	
	raner Provider Street each ess	
	, Florida	Zip Code
New Desire and the set of		Zlp Code
New Registered Agent's Signature, if changing Registered Agent	_	
I hereby accept the appointment as registered agent and agi	ree 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 a	un familiar with and
accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	provided for in Chapter 605, F.S. (2 address: Thereby confirm that the	Or, if this document is
company has been notified in writing of this change.	The state of the s	· mancus munanny

If Changing Registered Agent, Signature of New Registered Agent

13054897688

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
MGR	Angie Fernanda Gomez Salas	2660 SW 37TH AVE	🗆 Add
		APT 716	
		CONONUT GROOVE, FLORIDA 33133	
			DAdd
			□Remove
			☐ Change
	-		□Add
			□Remove
			□Change
			CAdd
		DRemove	
			□Change
·····			□Add
			CIRemove
			Change
			□Add
			ПКетоv е
			Change

· ·
five date, if other than the date of filing: [continue date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 If the date insurted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
rd 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 led.
NOVEMBER 7 2022

Typod or printed name of signee