L22000512651

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COVER LETTER

TO: Registration Section Division of Corporations			
Welsh Logistics LLC SUBJECT:			
Name of	Limited Liabil	ity Company	
Dear Sir or Madam:			
The enclosed Statement of Correction and fee(s) are subm	nitted for filing.		
Please return all correspondence concerning this matter to	the following:		
Lois M. Welsh			
Name of Person			
Welsh Logistics, LLC			
Firm/Company			
612 SW 6th Avenue			
Address			
Cape Coral, FL 33991			
City/State and Zip Code			
MrsWish@aol.com			
E-mail address: (to be used for future annual report	notification)		
For further information concerning this matter, please cal	H:		
Lois Welsh	239	292-9884	2024 SE SEURE
Name of Person	Area Code	Daytime Telephone Number	KETA
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	S M 9: 04
Enclosed is a check for the following amount:			
	5 Filing Fee & ertified Copy	☐ \$60 Filing Fcc, Certificate of Status & Certified Copy	

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: Welsh Logistics ELC The Florida Document number of the limited liability company is: L22000512651 SECOND: THIRD: Document to be corrected is: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: MGR - Welsh, Lois F should be changed to read: Welsh, Robert F. (Clerical Error) The second MGR listed as Welsh, Lois M, is correct <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. Lais MWels Lois M. Welsh, 9/17/2024 Signature of Authorized Representative Signature of new registered agent, if applicable: (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)