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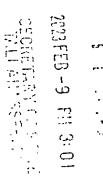
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COVER LETTER

Registration Section Division of Corporations

TO:

	EXPRESS CARGOS LLC			•*	
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	JAVIER GUZMAN				
		Name of Person		_	
	CELMON EXPRESS CAI	RGOS LLC			
		Firm/Company			
	5252 NW 85TH AVE AP	l' 110 7			
		Address			
	DORAL, FL 33166			2023 350	
		City/State and Zip Code			F.F*
	USTUEMPRESA@GMAII			8-9 11:87	:
	E-mail address: (to be used for future annual report noti	fication)	· . · · ·	
For further information of	concerning this matter, please c	all:		FI 3: 0	12 1
JAVIER GUZMAN		786 340-0372		2 2	
Name c	of Person	Area Code Daytim	e Telephone Numb	oct	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	Certifie	Filing Fee, rate of Status & ed Copy (all copy is enclosed)	
Mailing Address Registration 1 Division of C P.O. Box 632 Tallahassee.	Section Torporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations `allahassee	810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CELMON EXPRESS CARGOS 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 12/19/2022 and assigned Florida document number 1.220(0)529803 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NA The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." NAA 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: NΛ 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.

NA

NA

Enter Florida street address

_. Florida NA Zip Code

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JAVIER GUZMAN	5252 NW 85 TH AVE APT 1107	
		DORAL, FL 33166	≣Remove
			□Change
AMBR	SEBASTIAN PIÑERO	5252 NW 85TH AVE APT 1107	= Add
		DORAL, FL 33166	□Remove
			□Change
NA ———	NA	NA	□Add
NA	NA	NA (SECRETIAN DE Change
			☐ ☐ Remove
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ective date, if other than the da effective date is listed, the date must be	specific and cannot be pr	ior to date of filing of	or more than 90 days	o ptional) after filing.) P	ursuant to 605.02
e: If the date inserted in this block ument's effective date on the Depart			iling requirements	, this date wi	ll not be listed
cord specifies a delayed effective da s filed.	te, but not an effective	e time, at 12:01 a.	m, on the earlier o	f: (b) The 9	90th day after th
ed	2022	·			
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Typed or printed name of signee