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COVER LETTER

Registration Section Division of Corporations
CT: PICKUP & GO LUGISTICS LLC.
Name of Limited Liability Company
closed Articles of Amendment and (ee(s) are submitted for filing.
eturn all correspondence concerning this matter to the following:
Ernest Williams
PICKUP + GO LUGISTICS LCC.
12724 Gran Bay PKWYNSTE. 410
Jackson Ville fl, 32258 City State and Zip Code
LOGISTICS OF ICKUP and GO, CICK tomal address: to be used for tubic unital report notification)
ther information concerning this matter, please call:
Name of Person at (904), 532-4172 Area Code Daytime Telephone Number
ed is a cheek for the following amount:
5.00 Filing Fee S30.00 Filing bee & T. \$55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy -additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section

Mailing Address:
Registration Section
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

vrticles of Organization for this Limited Liability Company were filed on 1119 amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: w name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LEC ir new principal offices address, if applicable: acipal office address MUST BE A STREET ADDRESS) . a new mailing address, if applicable: Ting address MAY BE A POST OFFICE BOX) A amending the registered agent and/or registered office address on our records, enter the name of the new registered at and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Registered Agent's Signature, if changing Registered Agent: why accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the isions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and At the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is

of filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

vany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added moved from our records:

2 = Manager

.BE = Authorized Member

	Name	<u>Address</u>	Type of Action
AMBR	Ernest Williams	12724 Gran Bay PKWYW	STE 410 PAdd
		Jacksonville fl. 32258	□Remove
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			22 22 27 □ Remove
		_	⊡Remove
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ffective date, if other than the description of the date is listed, the date must be some If the date inserted in this block or ament's effective date on the Dep	k does not meet the ap	plicable statutory	g or more than 90 days filing requirement	optional) safter filing, i Pursuant to s, this date will not be	605.0207 (3)6 Fisted as the
record specifies a delayed effective of is filed.	late, but not an effecti	ve time, at 12:01	a.m. on the earlier (of) (b) The 90th day	after the
Dared 41 - 11	202	3			
	rnest William	M5 anthorized represen	tative of a member		-
£	rnest Willing	MMS_	fh:c		_