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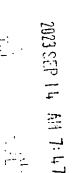
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COVER LETTER

	tion Section [™] of Corporatio	ous			•	
SUBJECT:	BKM	10615TIC	SOWTIONS	LLC		
	·	Name of Li	imited Liability Company			
The enclosed Artic	eles of Amend	ment and fee(s) are so	ubmitted for filing.			
Please return all co	orrespondence	concerning this matte	er to the following:			
	, 	BENJAY	MIN WARRE Name of Person	N		
		BKM 10619	TU SOUTION Firm/Company	15 lvc	•	
		18331 P	INES BUD.	UNIT #	150	
			City/State and Zip Code SKM WG15TC SOL (to be used for future annual			
		HELLO @ F	City/State and Zip Code 3 KM LOGISTIC SOL	UTIONS. 40	\	
For further information	ation concerni	E-mail address ng this matter, please		report notification)		
	GRUBB	6	at (305) .	345-0113		
:	Name of Person		Area Code	Daytime Telepho	ne Number	
Enclosed is a check	k for the follow	ving amount:				
S25.00 Filing		30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing A</u> Registra	Address: ition Section		<u>Street A</u> Registr	ddress: ation Section		
Division of Corporations			n of Corporation			
P.O. Box 6327 Tallahassee, FL 32314		14		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 SEP 14 BH 7: 47

BKM LOGISTIC SOLV	TIONS	uc.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	17 HI 1541
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now ap Liability Compa	pears on our r ny)	ecords.)	
The Articles of Organization for this Limited Liability Company Florida document number L230000212448 .	y were filed or	MAY I	, 2023	and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	bility compan	y here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company,"	the designation	"LLC" or the abbrevia	ttion "L.L.C."
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 agent and/or the new registered office address here:	address on or	ır records, <u>e</u>	nter the name of	he new registered
Name of New Registered Agent:				
New Registered Office Address:	Enter	Florida street a	ddress	
			Florida	
	City		Zi_{i}	n Code
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>			

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.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
CEO	BENDAMIN WARREN	18331 PINES BWD. UNIT#	ISD _□Add
		PEMBROKE PINES, FZ 33029	_ Remove
		18331 PINES BLVD. UNIT #150	_ □Change
MGR	DAVID GRUBBS	PEMBROKE PINES, FL 33029	_ IMAdd
			_ □Remove
			_ □Change
			⊥□Add
		 	_ □Remove
			_ □Change
			_ □Add
			□Remove
			_ □Change
		-	_ □Add
			_ □Remove
			□Change
			_ 🗆 Add
			_ 🗆 Remove
		<u> </u>	_ □Change

•	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an et	tive date, if other than the date of filing:
<u>Note:</u> docur	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the reco	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 fled.
Dated	SEPTEMBER 11 2023
	Signature of a member or authorized representative of a member
	DAVID GRUBBS
	Typed or printed name of signee

Filing Fee: \$25.00