1/28/25, 11:55 AM

Division al Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RELIABLE CONSULTING SERVICES, LLC

Account Number : I20220000017 : (305)896-2248 Fax Number : (786)438-5832

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIBERMEN TRAVEL SI	ERVICES LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{123000252510}{10000000000000000000000000000000000$	were filed on $\frac{05/23/2023}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
CONSOLIDATED SHIP C	HANDLERS LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "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 a	ddress on our records, <u>enter the</u>	name of the new registered
agent and/or the new registered office address here:		
A		75 20
Name of New Registered Agent:		
New Registered Office Address:	*P****	<u> </u>
	Enter Florida street address	o Fi
· 7 2	Florid	
	City	Sign Code
New Registered Agent's Signature, if changing Registered Agent:		필급 5
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office a company has been notified in writing of this change	verformance of my duties, and I rovided for in Chapter 605, F.S.	am familiar with and Or, if this document is
If Chans	ging Registered Agent, Signature of New	w Registered Agent

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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

Title	<u>Name</u>	Address	Type of Action
			□Remove
			□Change
			Dadd
			□Remove
			CIChange
			[JAdd
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	han the date of filing: thate must be specific and cann in this block does not meet to on the Department of State	the applicable statut	ory filing requirement:	s, this date will not be liste	.0207 (3) ed as the
f the record specifies a delayed ecord is filed.	effective date, but not an e	ffective time, at 12:	H a.m. on the earlier r	of: (b) The 90th day after	the
Dated JANUARY 28	20)25			
	<	Jose J. J	Att.		
-1-11-11	Signature of a memb	er or authorized epre	sentative of a member		
		JOSE LADATO			

Typed or printed name of signee