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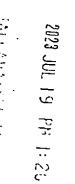
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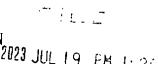
TO:		of Corpo				•
CUBIE		RS FREI	GHT LLC			
SUBJE	CI:		Name of Lim	ited Liability Company		
			mendment and fee(s) are sub-	_		
i rease i	ctain an c	orrespone	ZENIA ALFONSO DORT			
				Name of Person		
			STARS FREIGHT LLC			
				Firm/Company		
			4361 NW 11 ST			
				Address		
			MIAMI, FL 33126			
			. 10 . 10 . 11	City/State and Zip Code		
			zeniaalfonso8@gmail.com E-mail address: (to be used for future annua	l report notification	n)
For furt	her inforn	nation con	cerning this matter, please co	all:		
ZENIA	ALFONS	SO DORT	'A	786 3	19-8879	
		Name of F	rrson	Area Code	Daytime Tele	phone Number
Enclose	ed is a chec	ck for the	following amount:			
■ \$25	5.00 Filing	; Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is ea		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Daniet	Address:		Street A	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

ARTICLES OF ORGANIZATION 2023 JUL 19 PM 1: 25



STARS FREIGHT LLC		ALI AH.	<u>.</u> , , , ,
(Name of the Limit	ed Liability Compa (A Florida Limited)	ny as it now appears on our records. Liability Company))
he Articles of Organization for this Limited L	iability Company	were filed on 07/06/2023	and assigned
orida document number L23000255632	······································		
his amendment is submitted to amend the foll	owing:		
. If amending name, enter the new name o	f the limited liab	ility company here:	
ne new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applic	able:	4361 NW 11 ST	
Principal office address MUST BE A STREE	T ADDRESS)	MIAMI, FL 33126	
Inter new mailing address, if applicable:		4361 NW 11 ST	<u> </u>
Mailing address MAY BE A POST OFFICE	BOX)	MIAMI, FL 33126	
3. If amending the registered agent and/or i gent and/or the new registered office addre	**	address on our records, <u>enter t</u>	he name of the new regist
Name of New Registered Agent:			
New Registered Office Address:	4361 NW 11 S	Τ	
		Enter Florida street address	
	MIAMI	, Flor	rida ³³¹²⁶
	-	City	Zip Code

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.

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>	Name	Address	Type of Action
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			□Remove
			[]Change
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Company of a mambar or notherwall renegration of a mambar	.	Signature of a member or authorized represe	UKOQT
	ZENIA ALFONSO D	ORTA	
ZENIA ALFONSO DORTA		Typed or printed name of si	ence