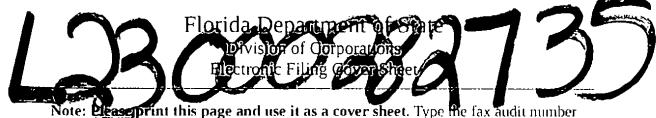
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Division of Corporations



(shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PROLOGISTIC SOLUTIONS LLC

DEPARTMENT OF STATE IVISION OF CORPORATION TO TAIL CANASSEE, FLORIDA

Certificate of Status0Certified Copy0Page Count04Estimated Charge\$25.00

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T. LEMIEUX JUN 2 9 2023

6/28/2023 13:19:56 PDT , To: 18506176383 Page: 2/4 From: Registered Agents Inc Fax: 20826/

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROLOGISTIC SOLUTIONS LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000282735</u>	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		ame of the new registered
	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I ar rovided for in Chapter 605, F.S. C	n familiar with and Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

6/28/2023 13:19:56 PDT 🕟

To: 18506176383

Page: 3/4

From: Registered Agents Inc

Fax: 20826

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
AMBR	GARCIA, ALBERTO	3450 RANDALL BLVD	□Add
		NAPLES, FL 34120	☑Remove
			Change
AMBR NAGIRA Holdings LLC	NAGIRA Holdings LLC	30 N Gould St Ste R	50 v 44
		Sheridan, WY 82801	□Remove
			□ Change
			ÐAdd
			□Remove
			
			□Remove
			Change
			□Add
		-	□Remove
			□Change
			□Add
			□Remove

Ta: 18506176383

				
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Effective date, if other than	the date of filing:		(optional)	
(If an effective date is listed, the date Note: If the date inserted in this document's effective date on the	must be specific and cannot be pushfilled does not meet the app	for to date of filing or more the dicable statutory filing requ	in 90 days after filing.) Pursuant t	
he record specifies a delayed effoord is filed.	ective date, but not an effective	e time, at 12:01 a.m. on the	ecarlier of: (b) The 90th day	after the
Dated June 28	. 2023			

Typed or printed name of signee