

L23000341813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

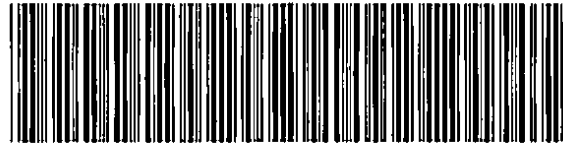
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/25/23--01001--015 **60.00

RECEIVED

FILED

2023 OCT 25 PM 1:01
2023 OCT 25 PM 2:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
STATE

A.P. 123
(01/23/23)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Citadel Logistic Solutions LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wadner Blaise
Name of Person
Citadel Logistic Solutions LLC
Firm/Company
1385 Brookwood Forest Blvd Apt 202
Address
Jacksonville FL 32225
City/State and Zip Code
Citadellogistic Solutions
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wadner Blaise at (904) 862-3706
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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**

Citadel Logistic Solutions LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

2023 OCT 25 PM 2:00

ESSEX COUNTY
TREASURER
STATE OF FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 7/19/23 and assigned

Florida document number LS2300034/813

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida

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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Wodner Blaise	1385 Brookwood Forest Blvd	<input type="checkbox"/> Add
		Apt 202 Jacksonville FL 32225	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Linda Blaise	1385 Brookwood Forest Blvd	<input type="checkbox"/> Add
		Apt 202 Jacksonville FL 32225	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Ronrick Raul Simms	124 Henue CT	<input type="checkbox"/> Add
		DAVENPORT FL 33896	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

10/23/23 _____
_____ W. Blair

Wadner Blaise
Typed or printed name of signee

Filing Fee: \$25.00