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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Pale Star District & Logistics 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:
Thaning Martin Name of Person
2425 Country Club Dive
Jallahassee FL, 32301
City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
The Marine at (25) 333-0544 Name of Person at (25) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Solution Status Solution Status Solution Solution Status Solution S

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

 \wedge

CCC STOUR DISSON (Name of the Limited Liability Compa (A Florida Limited)	any as it now appears on our records.)	_		
(A Florida Limited	Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L230003.587}$		gned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	bility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.1	C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		·		
Enter new mailing address, if applicable:	·	i		
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(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:	• •	registered		
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 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
MGR	Thamine Martin	2241 North Monrae Str Stellozy 74114hcsse F	& DAdd L 32.363 _ □Remove
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(If an ef <u>Note:</u>	ive date, if other than the date of filing:
f the recor	d 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 led.
Dated	8-2-2023
	Johnson Muty Signature of a member or authorized representative of a member Joseph Muty

Filing Fee: \$25.00