

9/11/23, 2:41 PM

Division of Corporations

**L230003190603**

Florida Department of State  
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DIVISION OF CORPORATIONS  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
TOP LOGISTICS USA LLC**

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T. LEON FUX

SEP 13 2023

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOP LOGISTICS USA LLC

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

The Articles of Organization for this Limited Liability Company were filed on 08/23/2023 and assigned Florida document number 123000395547.

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)**

8400 NW 36th ST Suite 450

MIAMI, FL 33178

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

8400 NW 36th ST Suite 450

MIAMI, FL 33178

**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:

CHANGE OF ADDRESS

New Registered Office Address:

8400 NW 36th ST Suite 450

*Enter Florida street address*

MIAMI

Florida 33178

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**

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	CHANGE OF ADDRESS	3400 NW 36th ST Suite 450	<input type="checkbox"/> Add
		MIAMI, FL 33178	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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