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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PROELSITAX

Account Number : 120230800184

Phone : (407)201-2375

Fax Number : (407)201-2375

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**Enter	the	email a	address	for	this	busin	ess	entity	to	be	used	for	future	9
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MPS LOGISTICS & SERVICES LLC

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Corporate Filing Menu

T. LEMIEUX

COVER LETTER

TO: Registration S Division of Co		:	
MPS LOG	ISTICS & SERVICES LLC		
3000EC1	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ALEJANDRO ALFONSO	D DA SILVEIRA	
		Name of Person	_
	MPS LOGISTICS & SER	VICES LLC	
		Firm/Company	1,242
	7125 ALTIS WAY APT	8213	
	·	Address	
	ORLANDO, FL 32836		
		City/State and Zip Code	
	alejandro.alfonso1970@gar		
	B-mail address: (to be used for future annual report no	tification)
For further information of	concerning this matter, please c	all:	
ALEJANDRO ALFONS	SO DA SILVEIRA	407 718-9098 at ()	
Name o	f Person		ne Telephone Number
Enclosed is a check for t	ne following amount:		
≦ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Se Division of Co The Centre of	rporations
Tallahasaca 1			se Street Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

MPS LOGISTICS & SERVICES LLC	
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L23000503039	were filed on 11/06/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7125 ALTIS WAY
(Principal office address MUST BE A STREET ADDRESS)	APT 8213
	ORLANDO, FL 32836
Enter new mailing address, if applicable:	7125 ALTIS WAY
(Mailing address MAY BE A POST OFFICE BOX)	APT 8213
	ORLANDO, FL 32836
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:	address on our records, enter the name of the new regis
New Registered Office Address:	
TON MARIOLOU OTHER NAMED	Enter Florida street address
-	, Florids
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	7.3

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. ---10

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

Title	Name	Address	Type of Action
AMBR	Alejandro Alfonso Da Silveira	7125 ALTIS WAY	
		APT 8213	□Remove
		ORLANDO, FL 32836	⊞ Change
			Change
			□Remove
			Change
			□Add
			☐ Remove
			☐ Change
			□Add
			□ Remove
			☐ Chánge
			□Add
		 	□Remove
			Change

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an eff lote:	ive date, if other than the date of filing: (optional) (ective 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 605.020' If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
recon	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.
ated .	DECEMBER 22
	Signature of a member of authorized representative of a member

Riling Fee: \$25.00