L24000205539

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Effity Name)
(Document Number)
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C-5/20/24

COVER LETTER

TO: Registration S Division of Co			
Atlas Loir	n Logistics LLC		
30B/EC1:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	El Mehdi Chakrouni		
		Name of Person	
		Firm/Company	
	741 Kettering Rd		
		Address	
	Davenport, FL 33897		
		City/State and Zip Code	-
	mehdichakrouni@hotmai		
		to be used for future annual report notifi	cation)
For further information (concerning this matter, please c	ali:	. Ö
El Mehdi Chakrouni		321- 900-6590 at ()	, , , , , ,
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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 Section
Division of Corporations
P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

-	City	, Florida Zip Code
	Bill Hould are	
New Registered Office Address:	Enter Florida stre	of address
Name of New Registered Agent.		
Name of New Registered Agent:		
gent and/or the new registered office address h	<u>ere</u> :	
. If amending the registered agent and/or regis		, enter the name of the new registe
		, , .
		 ()
Mailing address MAY BE A POST OFFICE BO	<u></u>	- :
nter new mailing address, if applicable:		·
		• • • • • • • • • • • • • • • • • • • •
Principal office address MUST BE A STREET A	(DDRESS)	
nter new principal offices address, if applicable		
-	, , ,	on TLLC or the approviation TL.C.C.
TLAS LION LOGISTICS LLC the new name must be distinguishable and contain the words	. "I Instead I Johilles Commons Webs. In Joseph	na 911 C" na thu akkenniarina 91 1 C "
. If amending name, enter the new name of the	e limited liability company here:	
his amendment is submitted to amend the following		
lorida document number L24000205539		
		and assigned
he Articles of Organization for this Limited Liabi	e. o 91 05/02/20	24
(<u>Name of the Limited I</u> (A I	<u>liability Company as it now appears on ou</u> Florida Limited Liability Company)	r records.)
ATLAS LOIN LOGISTICS LLC		

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>	Address	Type of Action
AMBR	Nadezda Chakrouni	741 Kettering Rd, Davenport, FL 33897	■ Add
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ocument's effec	tive date on the	Department o	of State's records	i.			
record spe	cifies a delay	ed effective	e date, but no	ot an effect	tive time, at	12:01 a.m.	on the earlier o
The 90th da	y after the re	cord is file	d.		,		
May	<i>r</i> 16		2024				
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Filing Fee: \$25.00