# 124000229914

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2024 JUL 23 PH 3: 14



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 25, 2024

BRIAN MOLL 5645 CORAL RIDGE DRIVE #396 CORAL SPRINGS, FL 33076

SUBJECT: RESOLUTE LOGISTICS LLC

Ref. Number: L24000229914

We have received your document for RESOLUTE LOGISTICS LLC and your-check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Date the last page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 524A00013883

Morgan E Lovett Regulatory Specialist II 24 JUL 23 PH 3: 14

www.sunbiz.org

### COVER LETTER

TO:	Registration Sec Division of Corp	tion oràtions	., v 4 <sup>g</sup> *	· · · · · · · · · · · ·		
		. Resolute L	ogistics LLC	erita <sup>\$1</sup>		
SUBJ	ECT:	Name of Limite	d Einbilly Company			
The e	nclosed Articles of A	Amendment and fee(s) are subm	itted for filing.			
Pleaso	e return all correspor	ndence concerning this matter to	the following:			
		Brian Moll				
			Name of Person		2 * -	2021
		Resolute Logistics LLC			- <del>-</del> -	2024 JUL 23 PH 3: 14
			Firm/Company		= -	23
		5645 Coral Ridge Drive #39		JL 23 PH		
			Address	<u> </u>		بب
		Coral Springs, FL 33076			11	-
			City/State and Zip Code		<del></del>	
		resolute396@gmail.com			_	
		E-mail address: (I	o be used for future annual report not	(Heation)		
For	further information o	concerning this matter, please ca	ill:			
Bria	n Moll		954 552-4608			
	Nanie (	of Person	Area Code Daytin	ne Telephone Num	ber	
Enc	losed is a check for t	the following amount:				
Ê	\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certif Certif	Filing Fed ficate of Stated Copy onal copy is to	atus &
	<u>Mailing Addre</u> Registration	Section	Street Address: Registration S			
		Corporations	Division of Co The Centre of			
	P.O. Box 63 Tallahassee,		2415 N. Moni		te 810	

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Resolute Log	istics LLC				
(Name of the Limited	Liability Compar V Florida Limited I	ny as it now appear Liability Company)	s on our records.)			
The Articles of Organization for this Limited Lia	bility Company	were filed on	5/17/2024		and assig	gned
lorida document number L24000229914	·					
his amendment is submitted to amend the follow	ving:					
a. If amending name, enter the new name of t	the limited liabi	ility company he	re:			
NA						
he new name must be distinguishable and contain the wor	rds "Limited Liabil	ity Company," the d	esignation "LLC" o	or the abbrevi		.C."
Enter new principal offices address, if applicable:		NA		<u>-</u> .	را 2024	6 7
Principal office address MUST BE A STREET ADDRESS)				<u>-</u>	<u>=</u>	× 100
				•.	23	4 1900 July 1
				žet i	PH	ال ال ال
Enter new mailing address, if applicable:		NΛ		·	ယ္	
Mailing address MAY BE A POST OFFICE B	<u>0X)</u>			ر المساو ر سال المساور ماسال المساور	-	
3. If amending the registered agent and/or registered office address	**	address on our r	ecords, <u>enter th</u>	e name of	the new	regist
Name of New Registered Agent:			· · · · · ·		•	
New Registered Office Address:	NΛ	11 . 12	· f			
		Enter Flor	ida street address			
			, Flor			
		City		Z	ip 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

Title	Name	Address	Type of Action
AMBR	Jami Moll	5645 Coral Ridge Drlve #396, Coral Springs, F1. 3	307€ □ Add
			Remove
			Change
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Effective date, if other an effective date is listed Note:  If the date insert document's effective of the date insert document's effective of the date.	I, the date must ted in this blo	be specific and ck does not r	i cannot be pri- nect the appl	icable statuto	ing or more the ry filing requ	(option 90 days after airements, this	filing.) Purs	suant to 60 not be lis	05.0207 sted as
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Dated 6/	1/202	4-B/	member or nu	horized repres	entative of a p	nember			
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Filing Fee: \$25.00