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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CALOP FREIGHT SERVICES LLC

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

State: Calop Freight Services LLC					
Enter new principal office address, if applicable:		 			
(<u>Principal office address</u> MUST BE A STREET ADDRESS)	1221 Brickell Ave suite 900, miarni Fl 33131				
Enter new mailing address, if applicable:	PO BOX 310293				
(<u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>)	Miami, FL 33131				
2. The Florida document number of this limited lia	bility compa	ny is: M190	00001951 ALL DE LA		
3. Jurisdiction of its organization: DE	·		V 16	\equiv	
4. Date authorized to do business in Florida: 02/	21/2019	<u>.</u>			
SECTION II (5-9 complete only the applicable	changes)		9.		
5. New name of the limited liability company: (mus	t contain "Li	mited Liabilit	y Company, ""L L.C.," or "LLC.")		
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.C	naging memb	ers adopting	ting business in Florida and attach a the alternate name. The alternate name	:	
6. If amending the registered agent and/or registere registered agent and/or the new registered office a		tress on our re	ecords, enter the name of the new		
Name of New Registered Agent: Sergio Lopez	: · 	<u></u>			
New Registered Office Address: 1221 Bricket	Il Ave suite				
, in		Enter F	lorida Street Adaress		
MI	<u>ami</u>	City	Florida 33131 Zip Code		
New Registered Agent's Signature, if changing Real hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as registed document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree and complet tered agent a in the regist	nt; to act in this e performanc s provided for	capacity. I further agree to comply wi e of my duties, and I am familiar with in Chapter 605, F.S. Or, if this		

. : 3

APPROVEL AND FILED

If Changing Registered Agent, Signature of New Registered Agent

3. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change: Change in Entity Memebers							
itle/ Capacity	Name	Address	Type of Acti				
IBR	Caicedo, Luis F	111 E Flagler St apt 608, Miam	FL 33 13 1dd				
			Z Remo				
			Add				
			Remo				
			Add				
		·	Remo				
			Add				
			Remov				
 -			Add				
aforemention	nder the law of which this entity is org	by the official having custody of records in	Remo				

Filing Fee: \$25.00