## 121000416389

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Ďo	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: BC	Name of Lim	OCZ OGIST	ics LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Tra'uov	Runt-	
	Boal W	arriorz Logist	ics LLC
	2780 E	Fowler tue -	#1050
	Tampa	FL 336 2 City/State and Zip Code	
	E-mail address: (	to be used for future annual report noti-	lication)
For further information ec	oncerning this matter, please ca		
Tra'UN R	ent-c	at ( <b>B</b>  3) 59 -	5750 e Telephone Number
		,,,,,	
Enclosed is a check for th	e following amount:		
X \$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	<u>:</u>	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
fallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- Road Warriorz	Logistics LLC
(Name of the Limited Liability Compa (A Florida Limited L	ny as 1846w appears on our records.  (ability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 21 000416389</u> .	were filed on $\frac{09/21/2021}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi  Road Warriorz LLC  The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	7320 East Fletcher Ave Tampa, FL 33637
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7320 East Fletcher Auc Tampa, FL 33637
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, enter the name of the new registered
Name of New Registered Agent:  New Registered Office Address:  732	O Fast Fletcher Aves 5  Enter Florida street address 5  Apa , Florida 33637
	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 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>	Name	Address	Type of Action
MGR	Travan O Buntz	7320 East Fletcher Ave	□Add
		Tampa, FL 33637	□Remove
			<b>⊠</b> Change
AMBR	Torin V Flueller	7320 East Fletcher A	W □Add
		Tampa, FL 33637	□Remove
			<b>⊠</b> Change
			□Remove
			□Change
			□Add
			□Remove
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ecord is tile		ed effective date	, but not an effective	time, at 12:01 a	.m. on the earlier of: ()	b) The 90th day after the
ited _	Octob	er 28	. 202	1.		
		Signa	iture of a member or aut	horized represent	ative of a member	
	VI	- [	$O$ $D_{\alpha}$	1		