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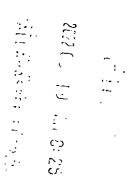
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COVER LETTER

ТО;	Registration Division of C	n Section Corporations	1.	* 4	· .
SUBJE	Big R L	ogistics, LLC			
.10.0312	····	Name of Lim	ited Liability Company		
The enc	losed Articles	s of Amendment and fee(s) are sub	mitted for filing		
Please r	eturn all corre	espondence concerning this matter	to the following		
		Rueben Rodriguez			
			Name of Person		
		Big R Logistics, LLC			
			Firm/Company		
		148 Towns Cir			
			Address		
		Haines City, FL 33844			
			City/State and Zip Code		<u></u>
		drlogistics01@outlook.com E-mail address (to be used for future annual re	eport notification)	
For furt	her informatic	on concerning this matter, please c	all:		
Rueben	Rodriguez		787 675-	-8132	
<u>. </u>	Nan	ne of Person	at () Area Code	Daytime Teleph	none Number
Enclose	d is a check fo	or the following amount			
□ \$ 25	5.00 Filing Fee	S \$30 00 Filing Fee & Certificate of Status	□ \$55 00 Filing Fee & Certified Copy (additional copy is encli-		\$60 00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add		Street Ad	dress:	

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 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Big R Logistics, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{09/12/2022}{1}$ and assigned Florida document number 1.22000407410 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

New Registered Agent's Signature, if changing 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>	Name	<u>Address</u>	Type of Action
AMBR	Diana Rosado Rivera	148 Towns Cir	= Add
		Haines City, FL 33844	□Remove
			□Change
			□Add
			□Remove
			□Change
		_ 	
			□Remove
			□ Change
 			□Add
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			□Remove
			□Change

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ffective date, if other than the d	ate of filing:			(optional)	
an effective date is listed, the date must b Nate: If the date inserted in this bloc	e specific and cannot k does not meet th	e applicable statu	filing or more than 9 tory filing require	0 days after filing)	Pursuant to 605 0207 vill not be listed as
ocument's effective date on the Dep	artment of State s	records.			
record specifies a delayed effective of	late, but not an eff	ective time, at 12	01 a m, on the ea	rlier of (b) The	90th day after the
I is filed					
October 13	202	2			
Dated	· -	· ·			
		5			
Si	gnature of a member	r or authorized repr	esentative of a men	ber	
		\sim			
Rueben Rodriguez		_			

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