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Division of Corporations

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From:

Account Name : FRANK, WEINBERG, BLACK, P.L.

Account Number : 12004000083 Phone : (954)474-8000

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CWC TRANSPORTATION, LLC

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T. LEMUEUX MAY 24 2023

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	WC Transportation, LLC		
(Name of the Limited )	ishilliy Company at it now annexes of lorida Linned Clability Company)	n our records.)	
The Articles of Organization for this Ulmited Liabili Florida document number <u>L07000049903</u> .		05/10/2007	and assigned
This amendment is submitted to amend the followin	g:		
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 desig	nation "LLC" or the	binaviation "L.L.C."
Enter new principal offices address, if applicable:			•
(Principal office address MUST BE A STREET AL			,
		<del></del>	
	<del></del>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office address her Name of New Registered Agent:	ered office address on our recor (0: Steven W. 1		nc of the new registered
New Registered Office Address:	1875 NW Comornia	Dantanard Catality	±623
Tables of Against	1875 NW Corporate Boulevard, Suite		ران م
	Boca Raton	Princes	33431 65
<del></del>	City	Flòrida	33431 /\times \infty \i
New Registered Agent's Signature, if changing Regists	ried Agent:		<b></b>
I hereby accept the appointment as registered ager provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to hierely reflect a change in the register company has been notified in writing of this change	agent as provided for in Chap.	luties, und I am J	anithiar with and
	Charing Registery Asset 5		
	If Changing Registerial Agent, Si	gnature of New Reg	stered 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	<u>Name</u>	Address	Type of Action
			□Remove
			Change
			□Remove
			□Change
			□Add
			Remove
			☐ Change
			□Add
			□Remove
			Ci Change
			□Add
<del></del>			
			□Remove
			Change

r. Iraille	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
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<del>-</del> _	
Note: If:	date, if other than the date of filing:  (optional)  so date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 ( the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to seffective date on the Department of State's records.
e record sp rd is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	May 23, 2023
	Signature of a member or authorized representative of a member
	Clemente E. Cruz Typed or printed name of signer

. . . . . . . . .