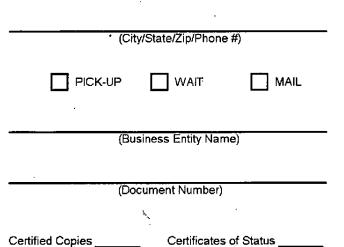
108000046894

THO'S Trucking field Clokimberly Fifield 3452 Neff Lakerd, Brooksville, PC. 34602



Special Instructions to Filing Officer:

L. SELLERS

MAR 12 2009

EXAMINER

Office Use Only



200145375572

03/11/09--01029--016 **25.00

O9 MAR II AH 8: IC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THD's	Truckin	y UC			
(Name of the Limited I. (A F	iability Company forida Limited Lia	as it now appears of bility Company)	our records.)		
The Articles of Organization for this Limited Liab Florida document number		ere filed on 3	5-09	and assign	cd
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the	he limited liabili	ty company here:			
no change					
The new name must be distinguishable and end with t "L.L.C."	he words "Limited	I Liability Company,"	the designation "L	LC" or the abbro	eviation
Enter new principal offices address, if applicable:		3452	Neft La	ike Roa	بط
(Principal office address MUST BE A STREET ADDRESS)		Brooksoil		3460	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Same	as prine	cpal	· • • • • • • • • • • • • • • • • • • •
B. If amending the registered agent and/or registered agent and/or the new registered offic		e address on our	records, <u>enter th</u>	c name of th	е пеж
Name of New Registered Agent:	Kin_	Fifield	-Bryant	-	
New Registered Office Address:	3452	Nelf La	Ke Road	ress) LC	₩ 6 0
	Brookwi	الف	, Florida,	34602	AR T
New Registered Agent's Signature, if changing Reg	City)		(Zip Gode)	= □	
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the reg company has been notified in writing of this cha	per and complete red agent as pro istered office ad	e performance of m wided for in Chapte	y duties, and I an er 608, F.S. Or, ij	n familiar with this documen	rand

If amending the Managers or Managing Members on our records	s, enter the title, name, and address of each Manager
or Managing Member being added or removed from our records:	The state of the s

MGR = Manager MGRM = Managing Member <u>Title</u> Name **Address** Type of Action MGR Remove Add A Remove bbA 🔲 Remove ☐ Add Remove 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) X Dated X Signature of a member or authorized representative of a member X Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00