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O9MAY IL AMII: 50
SECRETARY OF STAIL
TALLAHASSEE, FI ORID.

M. THOMAS

MAY 1 4 2009

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: <u>G&R TRA</u>	NSPORTATION SERV (Name of Lim	/ICES.LLC lited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	STEPHEN MANDELL	(A) CD	
		(Name of Person)	
	CARRIER SERVICES O	F FL	
	1210-H CAPITAL CIRCL	.E SE	
		(Address)	
	TALLAHASSEE, FL 3230	01	
	, , , , , , , , , , , , , , , , , , ,	(City/State and Zip Code)	
For further information co	ncerning this matter, please c	all:	
STEPHEN MANDELL		at (850) 942-7323	
(Name of Person)		(Area Code & Daytime To	elephone Number)
			09 F
Enclosed is a check for the	e following amount:		开京 是 ""
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & T Certificate of Status & T Certified Copy (additional copy is enclosed)
Registra Division P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tailahassee, FL 32301	ons · Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G&R TRANSPORTATION SERVICES L. (Name of the Limited Liability Com (A Florida Limite	L.C. pany as it now appears on our record d Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Compa	ny were filed on 06/06/2008	and assigned
Florida document number 1.08000056250 .=		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and end with the words "L.L.C."	imited Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		A SE
		A seepen
Enter new mailing address, if applicable:		ASSEE Y I 4
(Mailing address MAY BE A POST OFFICE BOX)		
		ORDA O
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		nter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida str	pot addross)
	,	,
	, Florio (City)	da (Zip Code)
	1 27	• • •

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 608, 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 Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member **Type of Action Address** Title Title **Name RAYMON DEAVER** MGR 3402 BARBARA LANE _ **A**dd Remove HILLIARD, FL 32046 Remove **∫** Add Remove Add Remove ___ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary Dated_ Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

STEPHEN MANDELL

Filing Fee: \$25.00