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JIVISION OF CORPORATIONS

08 AUG - 1 PH 1: 48

J. BRYAN

AUG - 4 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Green Bumpee trucking I/c (Name of Emited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Robert Awarson (Name of Person)
Robert Awarson (Name of Person)
GREEN BUMBET Trucking LLL (Firm Company)
1110 W Daklans Pork Blud #246 (Address)
Sunrise F/ 3335/ (City State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (Sb1) 7/6 9066 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GREEN BU	imper Trucking	1/4	
Name of the Limited Lia (A Flo	ibility Company as it now appears or orida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liabil Florida document number $\angle 0600069451$		7/14/06 and assigned	
		7 600	
This amendment is submitted to amend the following	ng:	2 4 1: 08 P. 1:	
A. If amending name, enter the new name of the	e limited liability company here:	6	
GREEN BUMPE	2 TRucking 40		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	DDRESS)		
		· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
		, Florida	
-	(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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:				
MGR = M MGRM =	anager Managing Member			
<u>Title</u>	Name	<u>Address</u>	Type of Action	
			Add Remove	
			= .	
<u></u>			- D	
			= ~	
D. If ame	nding any other information, $EIN + 23$.	enter change(s) here: (Attach additional sheets, i)	(necessary.)	
 Dated	July 20th	_, 2008.	SECRETARY OF STATE SIVISION OF CORPORATIONS 08 AUG - 1 PM 1: 48	
	Signature	ROBERT PNDER 5 >~ Typed or printed name of signee	r	

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Filing Fee: \$25.00