## L10000096345

or's Name)
<del> </del>
<u> </u>
e/Zip/Phone #)
WAIT MAIL
s Entity Name)
nt Number)
Certificates of Status
Officer:
g/4/2/3k

Office Use Only



000374358230

10/11/21--01007--001 \*\*25.00

FILED 2021 OCT 11 PH 7: 07 SECRETARY OF SHALL

## **COVER LETTER**

Registration Section Division of Corporations

TO:

48 STATES	S TRANSPORT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Meaghan Gwinn		
		Name of Person	
	RALS, LLC		
		Firm/Company	
	1013 Centre Rd Ste 403S		
		Address	
	Wilmington, DE 19805		
		City/State and Zip Code	· <del></del>
	sa.bukhari@48statestranspo		
	E-mail address; (	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
Meaghan Gwinn		800 400-6650	
Name o	f Person	at ()	: Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, 1	Section forporations 7	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroo Tallahassee, FL	porations allahassee 2 Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 OCT 11 PM 7: 07

48 STATES TRANSPORT LLC

ANSPORT LLC

(Name of the Limited Liability Company as it now appears on our records, Lord 2000, 1000,

were filed on $\frac{09/15/2010}{}$ and assigned
ility company here:
ity Company," the designation "LLC" or the abbreviation "L.L.C."
1317 Edgewater Drive
Suite 1580
Orlando, FL 32804
1317 Edgewater Drive
Suite 1580
Orlando, FL 32804
Enter Florida street address
Enter Florida street address Florida City Zip Code

If Changing Registered Agent, Signature of New 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	Address	Type of Action
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□ Change
			□ Remove
			□Change
		<del></del>	□Add
			□Remove
			□ Add
			□Remove
			□Change
			□Remove
			□ Change
			□Remove
			Change

tive date, if other than the da fective date is listed, the date must be If the date inserted in this block nent's effective date on the Depar	ate of filing:
rd specifies a delayed effective da iled.	late, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
October 7	2021
	N- ED

Filing Fee: \$25.00