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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Rocky Moun-	tain	Transpo	rt L	<u>LC</u>	
(Name of the Limited Lial (A Flor	rida Limited Lis	bility Company)	on our records.)	
The Articles of Organization for this Limited Liabili	ity Company v	vere filed on _06	1-21-13	and assign	ied
Florida document number $\angle/3000039$	935				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liabili	ty company here:			
The new name must be distinguishable and end with the "L.L.C."	e words "Limite	d Liability Company	," the designation	on "LLC" or the abb	reviation
Enter new principal offices address, if applicable) :				
(Principal office address MUST BE A STREET A	DDRESS)		<u>.</u>		
•					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX	<u>x)</u>				
B. If amending the registered agent and/or registered agent and/or the new registered office			records, <u>ent</u>	er the name of t	he nev
		•			
Name of New Registered Agent:					
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	771 1.7	1.7	
• • •	*	Enter Florida street address			
		Çity	, Florida	Zip Code	
New Registered Agent's Signature. If changing Regis	stered Agent:	4.9			
I hereby accept the appointment as registered as the provisions of all statutes relative to the prope accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	er and comple ed agent as pr istered office a	te performance of ovided for in Chap	my duties, and oter 608, F.S.	d I am familiar w. Or, if this docume e limited liability	ith and
	If Chang	ing Registered Agent,	Signature of Nev	w Registered Agent	—
	D 1 .	. 8 3		\$ % N	.1 [

MGR = Manager

MGRM = Managing Member

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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:

Title Address Type of Action ☐ Add ☐ Remove 🔲 Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ignature of a member or authorized representative of a member Typed or printed name of signee

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