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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Se Division of Cor					
emm	SERENIT"	Y TRANSPORTATION LLC				
SUBJE	.c.:	Y TRANSPORTATION LLC Name of Lim	ited Liability Company			
The enc	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please r	return all correspo	ondence concerning this matter	to the following:			
		TONYA DANIELS				
			Name of Person			
		SERENITY TRANSPORT	TATION LLC			
		Firm/Company				
		1118 E. 18TH STREET				
		Address				
		JACKSONVILLE, FL. 32206				
		City/State and Zip Code				
		TONYAD33@HOTMAIL.	COM to be used for future annual report notif	Testion 1		
For furt	ther information c	concerning this matter, please of		TO THE STATE OF TH		
	A DANIELS	encerning this matter, prease es	904 563-1210			
		of Person	at () Area Code Daytime	Telephone Number		
	Pagine 0	TESM	Auth Code 17dytilla	. receptione . value		
Enclose	ed is a check for the	he following amount:				
■ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)		
	Registi Divisio	ING ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpor	n		

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SERENITY TRANSPORTATION ELC		
(Name of the Limited Liabilit (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 07/17/2013	and assigned
Florida document number L130001001340		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the a	<u> </u>
Enter new principal offices address, if applicable:		ECRE
(Principal office address MUST BE A STREET ADDR	RESS)	
		
		A (790
Enter new mailing address, if applicable:		S TA
(Mailing address MAY BE A POST OFFICE BOX)		RIO SE
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		the name of the new
Name of New Registered Agent:		
N. D. L. 1005 All		
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 605, 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 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>	<u>Name</u>	Address	Type of Action
MGR	TONYA Y. DANIELS	1118 E. 18TH STREET	■ Add
		JACKSONVILLE, FL 32206	П.В.,
			Change
MGR	WILLIAM ALDERMAN, JR	THIS E. ISTH STREET	
		JACKSONVILLE, FL 32206	■ Remove
			□ Change
			Remove
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			 Ls 19

fective date, if other than	01/16/2018	(optional)	
n effective date is listed, the date ote: If the date inserted in thi	must be specific and cannot be prior to date is block does not meet the applicable state. Department of State's records.	of filing or more than 90 days after filing) attatory filing requirements, this date w	Pursuant to 605,0207 fill not be listed as
record specifies a dela The 90th day after the	yed effective date, but not an erecord is filed.	effective time, at 12:01 a.m. o	n the earlier o
January 16	2018		
	10		
Mid	is in Tholas	arci 1	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00