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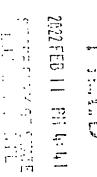
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COVER LETTER

ATLAS TI	KANSPORTATION AND LOC	GISTICS, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	Amine Mehl		
		Name of Person	
	ATLAS TRANSPORTAT	ION AND LOGISTICS, LLC	
		Firm Company	
	9341 Wellington Park Cir		
		Address	
	Tampa, FL 33647		
	mehl1979@yahoo.com	City/State and Zip Code	2022 FEB
	E-mail address; (to be used for future annual report notificat	ion)
For further information of	concerning this matter, please c	all:	
Amine Mehl		904 327-0808 at ()	
Name (of Person		lephone Number
Enclosed is a check for t	he following amount:		
☐ \$25.00 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 (additional copy is enclosed)
Mailing Addre Registration	Section	Street Address: Registration Section	

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

TO:

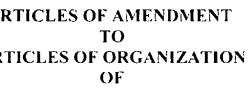
Registration Section Division of Corporations

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

ATLAS TRANSPORTATION AND LOGISTICS, LLC



The Articles of Organization for this Limited Liability Company were filed on $\frac{01/24/2014}{1}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Appraisal 360, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 9341 Wellington Park Cir. Enter new principal offices address, if applicable: Tampa, FL 33647 (Principal office address MUST BE A STREET ADDRESS) 9341 Wellington Park Cir. Enter new mailing address, if applicable: Tampa, Fl. 33647 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered

New Registered Agent's Signature, if changing Registered Agent:

agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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.

City

Enter Florida street address

, Florida

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
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			Remove
			□Change
			□Add
			□Remove
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Filing Fee: \$25.00