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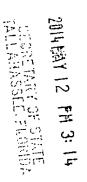
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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

Bracsh Transport, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

# Rebecca Johnson

Name of Person

Firm/Company

6875 Nicholson Rd

Address

Molino, FL 32577

City/State and Zip Code

braschtransports@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Johnson

.850.698-2890

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

Bracsh Transports, LLC				
(Name of the Limited Liability Co (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)			
The Articles of Organization for this Limited Liability Comp	eany were filed on 1/28/2014	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
Brasch Transports, LLC				
The new name must be distinguishable and end with the words "Limited	Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS	7)			
· William Office with the Annual Annu	<u> </u>			
	·			
Enter new mailing address, if applicable:		027		
Mailing address MAY BE A POST OFFICE BOX)	<del> </del>			
		<u> </u>		
<ol> <li>If amending the registered agent and/or registered egistered agent and/or the new registered office address</li> </ol>		nter the name of the n		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
<del></del>	, Floric	····		
	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

$MGR = \dot{M}$ $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Rebecca Johnson	6875 Nicholson Rd	Add
		Molino, FL 32577	□ Remove
<del></del>			Add
			Remove 201 Kary
			SSECTION Remove
			Add
			□ Remove
			□ Add
			□ Remove
		····	Remove

	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.) This admendment is to correct the spelling of the company name from	
_	Bracsh to Brasch and add Rebecca Johnson as an owner at 51%	
- ! -	not only an authorized representative.	
_		
(The effe the date	ve date, if other than the date of filing:	
Dated .	May 5 2014 .	
	Belicca a Johnson Signafure of a member or authorized representative of a member	
	Rebecca A. Johnson	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00