## Division of Corporations

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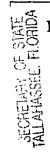
Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JFM TRUCKING & BROKERING, LLC

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Tuesday, March 25, 2014

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2014 MAR 25 PM 12: 16
TALLAHASSEE. FLORIBA

JFM TRUCKING & BROKERING, LLC

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

The Articles of Organization for this Limited Liability Co.	ompany we	re filed on 0	3/20/201	4	and assigned
Florida document number L14000046765	<del></del> •				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limite	ted liabilit	company b	tere:		
JMF BROKERING, LLC					
The new name must be distinguishable and end with the words "Limi	nited Liability	Company," the	e designation	"LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	_				
(Principal office address MUST BE A STREET ADDRE	ESS)				
	_				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)	-				
	<del>_</del> -				
B. If amending the registered agent and/or registered agent and/or the new registered office addre	ess here:	address of		rus, <u>enter</u>	the hante of the new
New Registered Office Address:			, <u>.</u>		····
		Enter Flo	rida street ad	dress	
				Florida	Zip Code
		City			Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:				
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete per ent as prov	formance of vided for in (	f my duties Chapter 60	, and I am fe 05, F.S. Or, i	amiliar with and if this document is
·	If Changing	Registered A	gent, <u>Signat</u>	ire of New Reg	istered Agent
F	Page 1 of	3			

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
····			Add
	•		□ Remove
			Remove
		· .	
			Add
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			☐ Remove

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D.	If amending any other information, enter cha	unge(s) here: (Attach additional sheets, if necessary.)
_	Totalia Jackson the sheet of Singa	(options)
Ľ.	Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department of the control o	e of receipt or filed date and cannot be more than 90 days after
	Dated 03/25.	2014
	2/-	
	1 / 7	nember or authorized representative of a member  2. AUTHORIZED REPRESENTATIVE OF A MEMBER
	7	Typed or printed name of signee

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