



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : MARKS GRAY, P.A.
Account Number : 120040000191
Phone : (904) 398-0800
Fax Number : (904) 398-3440

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: edarter@marksgray.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JZ EXPEDITED TRUCKING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JZ Expedited Trucking, 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 Company were filed on 10/16/2014 and assigned
Florida document number L14000155861

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

1111 Imeson Park Blvd.

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, Florida 32218

Enter new mailing address, if applicable:

1111 Imeson Park Blvd.

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, Florida 32218

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

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

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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>	<u>Address</u>	<u>Type of Action</u>
AMGR	Zach Fox	9601 N Main St Dr Ste 1	<input type="checkbox"/> Add
		Jacksonville, Florida 32218	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Robert Fox	1111 Imeson Park Blvd.	<input type="checkbox"/> Add
		Jacksonville, Florida 32218	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Maria Fox	1111 Imeson Park Blvd.	<input type="checkbox"/> Add
		Jacksonville, Florida 32218	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Notes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated September 19, 2019/

Signature of member or authorized representative of a member

Robert Fox

Typed or printed name of signer

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Filing Fee: \$25.00

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