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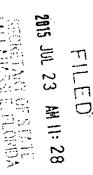
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COVER LETTER

TO:	Registration Section
	Division of Cornerations

SUBJECT: BJABRITTYWCKING 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:

Felix Bonilla
BJABRI Trucking LLC
Firm/Company 43 Andros Rd
Palm Spyings FC 3346/
Felix billa @ a Mail.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Felix BODI	19	ar (561)	249-9053
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

FILED

2015 JUL 23 AM 11: 28

BJABRI TYUCKING 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 07/17/15 and assigned

Florida document number L140001622.78

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:

(Principal office address MUST BE A STREET ADDRESS)

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;

(Mailing address MAY BE A POST OFFICE BOX)

Enter new mailing address, if applicable:

Felix H. Bonilla

New Registered Office Address:

HNOYDS KO

Enter riorida street adares

Palm Springs

_, Florida

<u>3346/</u>

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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			. □ Add		
			□ Remove		
			Change		
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D. If amending a	ny other information, e	enen enange(s) nere	. (мист аааиюта	sileeis, y riecessury,		
						
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(If an effective date Note: If the dat	if other than the date is listed, the date must be speed inserted in this block doctive date on the Department	ecific and cannot be priorates not meet the applica	o date of filing or more to ble statutory filing rec	(optional) han 90 days after filing.) Purs quirements, this date will r	uant to 605.0207 not be listed as	(3)(b) the
	ecifies a delayed effe ay after the record is		an effective time	e, at 12:01 a.m. on t	he earlier of:	:
Dated	7/17/15	2015	- - '			
	Signat	ure of a member or author	rized representative of a	member		
	Felix F	1. Boni	lla			

Page 3 of 3

Filing Fee: \$25.00