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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JG VP TRUCK in LLC Name of Limited Dability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.	2011 3.5 TAL	
Please return all correspondence concerning this matter to the following:	2019 APR 16	T
Jorge Andrade Name of Person	ASSEE F	ار ا
JGVP TRUCKING ILC	9-21 Loàibh	_
8 Round Mill Un Address	_	
Palm Coost, FL 32164 City/State and Zip Code	_	
rebestie 1978 @ amail com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Pebeca Andrade at 386 864.2583 Name of Person Area Code Daytime Telephone Number	er	
Enclosed is a check for the following amount:		
(additional copy is enclosed) Certific	Filing Fee, tate of Status & d Copy al 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

ed 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 Dec 19, 2019 and assigned Florida document number L1400193270. 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 "Zimited Liability Company," the designation "LLC" or the abbreviation "L.L." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 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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an effective date is	other than the disted, the date must	be specific and of	cannot be prior to	date of filing or	more than 90 da	_ (optional) avs after filing) Pursuant to 60	15 0707 (
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Filing Fee: \$25.00