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SECRETARY OF STATE,
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COVER LETTER

Division of Corporations
SUBJECT: TAMB TRUCKING COMPANY, 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:
Maynard Saddler Name of Person
Firm/Company
1670 The Oaks Blud Address
Kissimmee FL 34746 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mayrard Saddler at (407) 552 0170 \$\frac{1}{25} \frac{2}{25} \frac{2}{
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \$\Bigcup \\$55.00 Filing Fee & \$\Bigcup \\$60.00 F

MAILING ADDRESS:

TO:

Registration Section

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

TAMB TRUCKING COMPANY, LLC

(Name of the Limited Liab (A Flori	illity Company as it now appears on our recida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability	Company were filed on	2015 and assigned
Florida document number <u>L 15 0001865</u> 8	<u>31</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
TAMB REALTY CONTINUE new name must be distinguishable and contain the words "L	IPANY, LLC imited Liability Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	DRESS)	
		ZOUS NO TO
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		678 N
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		
Name of New Registered Agent:		
New Registered Office Address:		
	dress	
		Florida Zip Code
	City	Zip Coae

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 = AMBR =	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KEC Realty Campany, LLC	109 Johnson Ave	Add
		Piscataway, NJ 08854	Remove
			Change
MGR	FRANKLIN, CIARDI	109 Johnson Ave	
		109 Johnson Ave Piscataway, NJ 08854	Remove
			Change
			Add
			□ Remove
		LLA HAGE AGE	Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of	f filing or more than 90 da		
lote: If the date inserted in this block does not meet the applicable state ocument's effective date on the Department of State's records.	utory filing requiremen	nts, this date wil	ll not be liste
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	fective time, at 12	2:01 a.m. on	the earlie
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The 90th day after the record is filed.			
The 90th day after the record is filed.			
e record specifies a delayed effective date, but not an ef The 90th day after the record is filed. Dated <u>November</u> , 24, 2015.			

Page 3 of 3

Filing Fee: \$25.00